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Journal

OF THE NORTH CAROLINA DENTAL SOCIETY

JANUARY, 1964



VOL. 47, NO. 1

Mid-Winter Issue



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This Issue Is Dedicated to . . .



**Cleon W. Sanders, D.D.S., F.A.C.D.
Benson, North Carolina**

His unflagging zeal and quiet wisdom in our council halls have made him a constant inspiration for us, his admirers, to follow in working for the advancement of the profession.



The President's Page



THE NORTH CAROLINA DENTAL SOCIETY OFFICERS and the Executive Committee regret not being able to have participated in the Fourth and Fifth Annual District Dental Society Meetings. We were present at the hearing of the complaint of R. A. Hawkins vs the North Carolina Dental Society, and the Second District Dental Society in the U. S. District Court in Charlotte before Judge Wilson Warlick. All of us feel and enjoy the warm feeling that is generated by these scientific meetings.

Dental Aspects of the Workman's Compensation Act

According to an analysis of Workman's Compensation Laws, published by the United States Chamber of Commerce, January 1962, Workman's Compensation covers these fundamental points:

- (1) Provide certain prompt and reasonable compensation to victims of work accidents and their dependents.
- (2) Free the courts from delay, costs, and the tremendous work load of this mass of personal injury litigation.
- (3) Relieve public and private charities of the financial drain caused by uncompensated industrial accidents.
- (4) Eliminate economic waste in payment of fees to lawyers and witnesses, and save the time consumed by trials and appeals.
- (5) Supplement concealment of fault in accidents by a spirit of frank study of causes, thereby eliminating accidents that are preventable and reducing cost and suffering.

It was the purpose of the General Assembly in providing for compensation for an employee, that the North Carolina Industrial Commission, created by the Workman's Compensation Act, shall administer

its provisions to the end that both employee and employer shall receive the benefits and enjoy the protection of the Act.

The Industrial Commission has exclusive jurisdiction over the rights and remedies afforded in the Act. The Commission is charged by law with the duty of passing upon fees charged for dental services rendered to patients whose cases come within the provision of the North Carolina Workman's Compensation Act.

To avoid uncertainty, and for the convenience of those rendering dental services, as well as for the convenience of those ultimately responsible for payment of dental expenses incurred, the Industrial Commission published a fee schedule. The fees set forth therein are those which the Commission will ordinarily approve. However, if circumstances seem to indicate a fee in excess of those published, the attending dentist must submit a detailed description of the extraordinary services rendered and the same will be given careful consideration. After you have received a copy of the revised fee schedule, I would ask each of you on behalf of the North Carolina Dental Society to check the list of services and fees allowed under the new fee schedule.

You, who could not attend the American Dental Association Meeting in Atlantic City, were missed. Much was accomplished, and food for thought and learning was presented each day in the scientific meetings.

The House of Delegates voted 273-112, to raise the American Dental Association annual dues from \$30.00-\$40.00 effective January 1, 1964.

The American Dental Association has greatly expanded in the following areas: dental health, education, dental therapeutics, dental material, public information, and various fields of legislation.

It was stated that the present housing facilities are not adequate for the expanded activities of the Association.

The *Journal of the American Dental Association* started a new feature in October, 1963. It will be a report from the Association's Washington Office, and will discuss legislation and legislators.

The American Dental Association House of Delegates passed a resolution recognizing Endodontics as the eighth special area of dental practice.

The House amended the bylaws to allow retired dentists moving out of the jurisdiction of a constituent society to maintain membership in that society.

The Division of Public Health and Resources states that injuries to the face and mouth account for more than half of all football injuries. We should ever be mindful of how important it is for all football players to wear mouth protectors.

I commend you for the wonderful work you have and are doing for our Society. Without the magic of your loyal support, the North Carolina Dental Society cannot possibly achieve excellence and maintain first-place status in accomplishments.

A Happy New Year to all of you, and may 1964 bring you prosperity, peace and happiness.

S. BYRON TOWLER, D.D.S.

Editorial

DENTISTRY'S CHANGING PROFILE*

DENTISTRY HAS PROGRESSED to its present professional status in a remarkably short period of time. Its realm of knowledge and areas of service expand each year, and it becomes increasingly difficult to enlarge one's personal capacities to remain adequate to one's tasks — particularly in the field of general dentistry.

In addition to a growing need for dental services, there is an exponentially growing demand for these services due to a more urbanized and sophisticated population.

There are substantially increasing costs in the obtaining of a dental education, in the equipping of a dental office, and in the running of a daily practice. These costs must, of necessity, result in higher fees. Concurrently, there are those who would exploit this situation by infringing on the dental field, lacking the qualifications to do what they propose to do.

There has been a shocking decline in the public image of the individual physician and to some extent the dentist, and quite candidly, this is not totally without justification. This can be a powerful rebounding force to our detriment in the legislative halls of the land. Relatedly, the political pressures in the areas of social legislation are becoming more acute.

There was a time when the individual, particularly in his right of free choice to do or not to do,

counted for much in our society. This time is past, and however lamentable it may be, we must face the reality that we have a series of difficult choices before us — none of which are particularly appealing. We cannot afford isolationism in dentistry, either the isolation of the individual from organized dentistry or the isolation of organized dentistry from areas of public concern. Our case must be taken to the public and our linen had better be clean when we get there. There is no place in dentistry for the individual whose only concern is for bigger and better fees. There is no place in dentistry for the idea that substandard dentistry should not be accountable to the profession and that the practitioner thereof should be immune from valid criticism through clouded ethical considerations.

These few thoughts should point out to us the necessity for a changing profile of dentistry.

At one time it was considered indiscreet for professional people to engage in political activity. With the major political parties aware of the tugging appeal of health care as an issue for collaring votes, the professions can little afford the luxury of holding themselves aloof from politics. Had they viewed more clearly the hard choices before them and enthusiastically supported the Kerr-Mills Bill of 1960, there would not be such fruitful forage for the supporters of health care via the

* The presidential address of Dr. C. W. Poindexter to the Third District Dental Society, Mid Pines Club, Southern Pines, North Carolina, October 6-7, 1963.

Social Security System. If dentistry fails to heed this lesson and continues in an "ivory tower" conservatism, it may lose its traditional position by default.

Around us are emerging new demands for comprehensive care and newly evident unmet needs. How successfully we meet these demands and needs may well determine the survival of the dental profession as an autonomous group.

One drastic need is manpower: its problems are solvable but are indigenously involved with the need for more auxiliaries and expansion of their duties in areas presently served by dentists. A sane appraisal of our future depends upon an open-minded acceptance of the principle that the professional should be relieved of those aspects of practice which are purely technical, in order to serve a greater population.

Here too there are admitted dangers. We have, thus far, created but a few of the many auxiliary positions which we must ultimately have. Of these the dental hygienist is the latest and most revolutionary creation. In the dental hygienist we have an auxiliary who is overtrained for her primary duty, dental prophylaxis. Conversely she is grossly undereducated and therefore unacceptable as a dental health educationist. Since we have erred in conceiving the scope of dental hygiene, we are paying the price of too few hygienists available because of the limited teaching facilities and the relatively long period of training required. This situation has created keen wage competition for her services to the end that she is demanding and receiving equal compensation with the professionally trained dentist. The shortcomings of our

creation are apparent, and this folly must not be repeated.

In conceiving our future auxiliaries, the following objectives should be considered:

1. Their duties should be clearly defined.

2. Their scope should be realistically evaluated in terms of minimum training possible consistent with getting the job done well.

3. Facilities for their training should be adequate to meet the anticipated demand for their numbers.

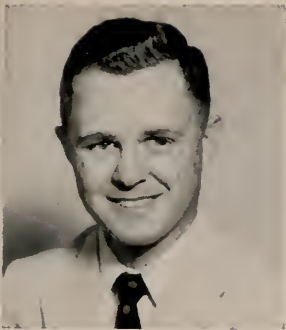
4. There should be appropriate and effective safeguards that their activities shall forever remain auxiliary and under the direct supervision of the dentist.

5. As these auxiliaries become available we must be prepared, each and all, to surrender many of our favorite tasks. The chaos of a particular duty being performed in one office by a dentist and in another by an auxiliary must not be repeated.

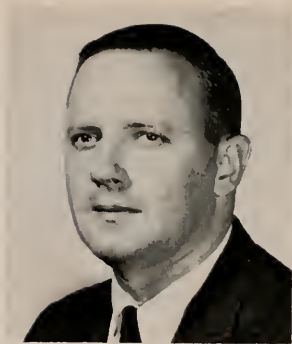
Finally, we should be aware of the tremendous potential for change through pre-paid dental plans. The dental service corporation is unquestionably the most desirable of an impending hard choice, a choice which we must soon make lest we pass up our time and opportunity to have the choice at all.

If we boldly grasp these concepts, shedding our traditional phobias we shall go far in meeting the challenges to our profession today and in the future. Our financial status will remain secure, and the costs to the voting public for dental services will remain in an area where they can be reasonably met without governmental intervention.

C. W. P.



DR. CRANDELL



DR. BAWDEN



DR. FREEDLAND



DR. LASLEY



DR. McFALL

IN THIS ISSUE

JAMES W. BAWDEN, D.D.S., M.S., Ph.D. ("Prenatal Administration of Fluorides") has recently been appointed Coordinator of Dental Research at the U. N. C. School of Dentistry, and will direct activities at the new dental research center.

CLIFTON E. CRANDELL, B.S., D.D.S., M.Ed. ("The Lamina Dura in Radiographs") is Associate Professor of Oral Diagnosis and Treatment Planning at the U. N. C. School of Dentistry.

J. B. FREELAND, D.D.S. ("Systemic Considerations in Endodontic Therapy") has practiced in Charlotte since 1938. Currently, he is President-Elect of the Second District Dental Society.

L. M. KENNEDY, D.D.S. ("Two Faced Dental Image"), a graduate of Baylor University College of Dentistry, is in general practice in Dallas, Texas.

J. T. LASLEY, D.D.S. ("Your Relief Fund: How It Works") of Greensboro has served on the Relief Committee since 1953 and as its chairman since 1956.

WALTER T. McFALL, Jr., B.S., D.D.S., M.S.D. ("The Periodontal Abscess") is Assistant Professor of Periodontology and Oral Pathology at the U. N. C. School of Dentistry.

Prenatal Administration of Fluorides*

***JAMES W. BAWDEN, D.D.S., M.S., Ph.D.**

IT HAS BEEN CLEARLY DEMONSTRATED that the ingestion of drinking water which contains an optimum amount of fluoride, during the formative stages of dental development, will impart to the teeth an increased resistance to dental caries.¹⁻¹² Other techniques in the utilization of fluorides such as topical application of sodium or stannous fluoride, the use of stannous fluoride in toothpaste, and the use of stannous fluoride in prophylaxis paste have been instituted and are reported to give protection from dental decay.¹³⁻³¹ However, definitive research on the latter two of these three approaches to fluoride therapy is of moderate proportions and the degree of protection offered by any of the methods is still open to question. Still another approach is the ingestion of fluorides in tablet or capsule form. The effectiveness of such oral preparation, when given

during infancy and childhood, is supported by minimal and rather inconclusive clinical data.³²⁻³⁷ It should be mentioned that, of the dozens of commercial products on the market which provide fluoride by the oral route, we do not know of a single one which has been subjected to objective and scientific evaluation. Thus, it seems, at this point, that fluorides in the water still offer the most effective method of fluoride administration, with the topical application of sodium or stannous fluoride as an alternative wherein effectiveness is reduced and less clearly defined.

Recently a number of commercial products, which are designed to provide prenatal fluoride supplementation by administration to the mother during pregnancy, have appeared on the market. Such preparations usually combine fluoride with a previously marketed prenatal vitamin and

* Assistant Dean and Coordinator of Research, School of Dentistry, University of North Carolina.

mineral supplement. It is the purpose of this paper to discuss the rational and effectiveness of such prenatal fluoride administration on the basis of research data available at this time.

Rationale and Theoretical Requirements for Effectiveness

For the prenatal administration of fluorides to be effective in providing protection from dental caries to a child, several things must occur.

Following ingestion of the preparation by the mother, the fluoride must be absorbed from the gastrointestinal tract and enter the mother's blood in sufficient amounts. It is still a question as to whether more constant, relatively low blood fluoride levels are more effective in caries control than intermittent, spiking levels. There are no studies which directly approach the problem. Bone uptake studies, which may or may not relate to caries control, are contradictory when uptake is related to constant and intermittent blood levels.³⁸⁻³⁹ However, the fact that blood fluoride levels are quite stable when subjects are utilizing a fluoridated water supply,⁴⁰ and the fact that such water fluoridation is apparently the most effective method of fluoride therapy support the thesis that constant blood levels are the most effective.

After the fluoride has been absorbed and has entered the blood it must then be transported, via the maternal circulation, to the placenta where it must cross the placenta and enter the fetal circulation. Once the fluoride enters the fetal circulation in sufficient amounts over a sufficient duration, it will then be incorporated into the developing dental tissues. Such incorporation

of prenatal fluoride into calcifying tooth structure is assumed to provide protection from dental caries just as incorporation of postnatal fluoride into calcifying dental structures provides protection. It should be noted that only the parts of the teeth undergoing calcification will benefit. None of the permanent dentition calcifies prenatally, and the portion of the deciduous dentition which calcifies prenatally is confined, largely, to the incisor teeth with only the most occlusal portions of the cuspids and molars having initiated calcification before birth.⁴¹

Relative to this chain of physiological events, there are two questions of primary importance which should be asked: (1) Do the prenatal fluoride preparations which are presently on the market provide maternal blood fluoride levels of desired concentration and duration following their ingestion? (2) Once the fluoride has entered the maternal circulation and been transported to the placenta, does it cross the placenta and enter the fetal circulation in sufficient amounts and duration to accomplish the desired results?

Available Experimental Evidence

At this time there is not a great deal of scientific information available relative to the general physiological considerations and, more particularly, to the major questions in point.

On the basis of the evidence presented, it seems that orally administered fluorides in capsule or tablet form can be rapidly and efficiently absorbed from the digestive tract.⁴²⁻⁴⁵ Some conditions, such as simultaneous administration of certain calcium compounds, have been

demonstrated to reduce intestinal absorption.⁶⁰ However, it is also fairly well established that, once fluoride enters the plasma, it is very rapidly cleared from the circulation by diffusion into the extravascular fluid compartments; and, after this equilibration is achieved, the fluoride clearance from all the body fluids continues at a slower rate, by entry into calcified tissues and clearance through the kidney. A blood level peak is attained shortly after ingestion, the peak falls off rapidly, and by one hour after entry into the plasma approximately 95 per cent of the fluoride has disappeared from the circulation.^{42, 46, 47}

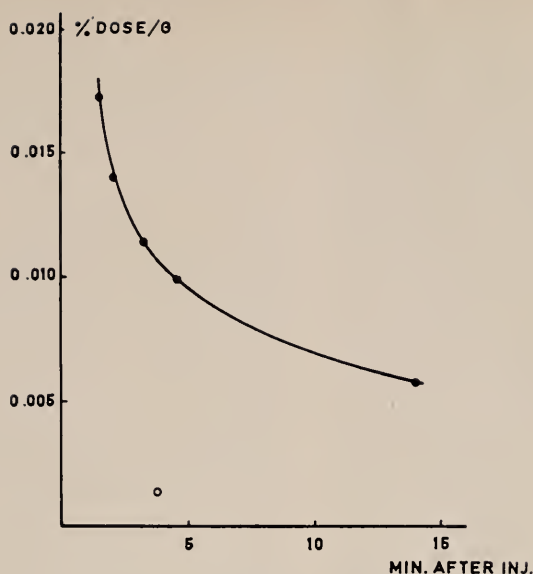
It must always be remembered that only the fluoride that exists in the maternal plasma can be carried to the placenta for potential transfer to the fetus.

Evidence with regard to the placental transfer of fluoride has been conflicting due to several problems which exist in investigation of the situation.⁴⁶⁻⁵⁷ First of all, chemical analysis for fluoride in trace amounts is expensive, difficult, and subject to error. Secondly, radioactive fluorine, F^{18} , has an extremely short half-life of 111 minutes and effective use of the tracer for experimental work is severely limited. Thirdly, human experimentation during pregnancy is restricted and the use of animals for such studies always introduces the problem of species variation. However, considering all of the available evidence it seems clear that fluoride does cross the placenta and enter the fetal circulation, in the human and certain other species, when the maternal blood levels are within a relatively low range.^{46, 47, 49, 50, 53-58} It is important to note, on the other hand,

that the fetal blood fluoride levels apparently never come close to the maternal blood levels and, in fact, exist at a concentration of only 25 per cent or less of the maternal level.⁴⁶⁻⁴⁷ There are two possible interpretations of this finding. The first possibility is that transfer of fluoride across the placenta may be limited to some extent. The second possibility is that, soon after fluoride enters the fetal circulation, it is rapidly cleared by diffusion into the extravascular tissues and by subsequent incorporation into the calcifying skeletal and dental tissues of the fetus. Recent data indicates that uptake into the fetal skeleton and teeth does occur quite rapidly but accurate quantitation, particularly over extended periods of time, has not been made.⁴⁶ At the present time the existence of restricted fluoride transfer across the placenta in the human, or in experimental animals which seem to closely approximate the human, is a distinct possibility but it cannot be definitely confirmed or denied on the basis of available experimental evidence.

It is also of interest to note that fluoride can pass from the fetal circulation to the maternal circulation when the concentration gradient exists in that direction.⁴⁶ This opens up the possibility that net gain of fluoride by the fetus may be the result of fluoride passage in both directions across the placenta, with maternal-to-fetal transfer predominating in the usual physiologic situation.

When one attempts to consider the overall physiology of fluoride metabolism during pregnancy with regard to the human, two recent studies seem to contribute graphic and statistical data of particular in-



F^{18} content of maternal blood (●), foetal blood (○) and placenta (△).

Mother: A. B., 18 years, mental deficiency, gravida I. Foetus 26 cm.

Figure 1

terest. Ericsson and Malmnäs, in Sweden, have taken advantage of law concerning legal abortions in their country to do experimental fluoride work on humans.⁴⁷ They have injected radioactive fluorine into pregnant women, sampled the maternal blood at intervals, and sampled the fetal blood during the abortion. Figure 1 depicts a typical set of data from their work and one can see how rapidly the maternal F^{18} level declines; and, how low the fetal blood level is when the single sample is secured. Values for the percentage of the original dose recovered are presumed to be for 1 ml. but the article does not clearly state this. These same workers have also used rabbits for the same type of experiment and have obtained values very

similar to the human but, of course, could exercise considerably more flexibility in experimental technique than was the case with women. The fetal rabbits were removed one at a time at appropriate intervals to get several fetal values on a single experimental setup. Possible changes in uterine and placental blood flow and placental transfer must be considered in such serial removal of the fetuses. However, the data presented by Ericsson and Malmnäs seem quite valid.

A research team at the University of North Carolina representing the Department of Pedodontics, and the Department of Obstetrics and Gynecology, (Bawden, Wolkoff, and Flowers), has been investigating the physiology of fluoride metabolism

during pregnancy in sheep.⁴⁶ In brief, a surgical technique has been devised wherein the maternal circulatory status can be monitored to determine this physiologic condition of the animal; and, the maternal blood can be sampled, or continuously monitored, over a period of time to determine F^{18} blood levels following injection of the tracer. The technique also allows access to the fetal circulation for monitoring and sampling *while the lamb is still in the uterus* with the placental-uterine circulation fully intact. Figure 2 shows typical values obtained in this study for the maternal and fetal F^{18} blood levels over a period of 80 minutes following injection of the tracer. Values are very similar to values obtained on the human by Ericsson and Malmnas but a more physiologic preparation and greater flexibility allow collection of more refined data. Details of the work conducted at U.N.C. have recently been submitted for publication.

These two studies seem to offer the most definitive information available on the topic, but many questions are still unanswered relative to the physiology of prenatal fluorides.

Clinical Findings

Of course, the point of major interest is whether or not prenatal fluoride administration in tablet or capsule form will result in a reduced caries rate in the offspring. Only one clinical study relating directly to the problem has come to the attention of the author. This study⁵⁸ reports a positive result but methodology and statistical methods employed in the study have been subject to considerable criticism. One other investigation⁵⁹ compared children who were born just prior to fluoridation of the local water supply with a group from the same community who were exposed to the fluoridated water both pre- and post-natally. No difference in caries experience during childhood could be demonstrated between

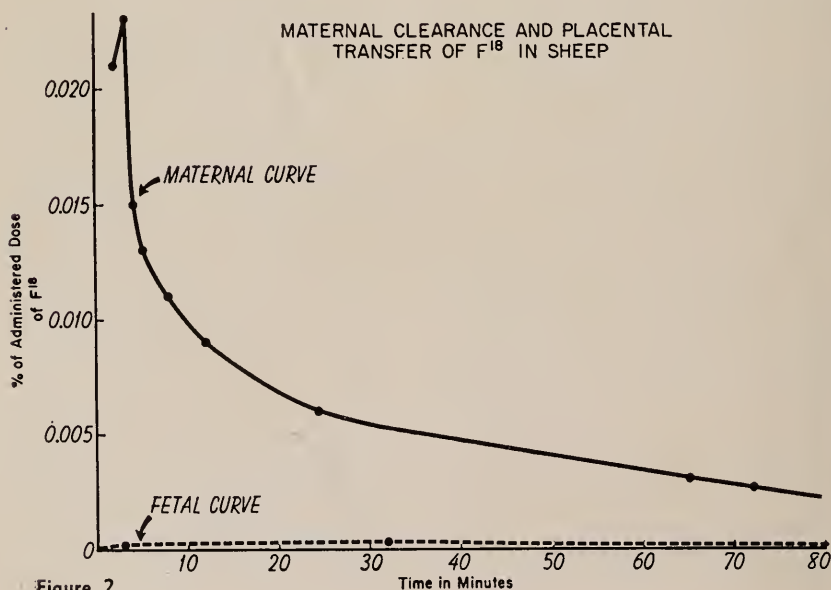


Figure 2

the two groups. The effectiveness of prenatal exposure to a fluoridated water supply probably has some relation to prenatal exposure to tablet or capsule fluoride therapy but it is not possible to draw any firm conclusions.

Summary

It is not possible to state, on the basis of scientific evidence, that prenatal administration of fluorides will result in a beneficial effect in reduction of dental decay in the offspring. Likewise, the possibility of such positive results cannot be eliminated. Physiologic evidence indicating rapid clearance of fluorides from the maternal blood and relatively low fetal blood levels casts serious doubt on the probable effectiveness of the once-a-day administration of oral

fluoride preparations. Clinical data are conflicting in nature and minimal in amount. Finally, the commercial products available have not been subjected to clinical trial in their marketed form. It seems very unlikely that the use of such preparations will do any harm but patients should not be given the impression that clinical effectiveness in reducing dental decay in their children is an established fact. Of major importance, the administration of prenatal or postnatal fluorides in tablet or capsule form *should not* be presented as an established procedure which serves as a substitute for fluoridation of water supplies.

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The Lamina Dura in Radiographs

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THE LAMINA DURA, the thin white line surrounding the teeth on intraoral radiographs, is widely accepted as an anatomic landmark of importance in medical and dental radiographic interpretation. The significance of this tissue in diagnosis is perhaps stressed too much by some, appreciated too little by others. Several opinions are presented for consideration.

Significance

Manson⁶ says “. . . it seems wisest to avoid too critical an interpretation of this line and not to allow variations in its appearance to determine diagnosis or treatment.” Elfenbaum,² on the other hand, says “. . . the lamina dura can be included among the gauges of a patient's health,” thus attaching considerable significance

to this tissue as an indicator of a patient's systemic condition. Pendergrass⁹ tends to place less importance on the lamina dura, saying, “Many clinicians often interpret the absence of the lamina dura as an indication of infection. This, however, is a mistake . . . many times it is practically missing roentgenographically, due either to the size or position of the tooth, or to the nature of the bony structure itself.” He further points out that as the root of the tooth gets smaller, the amount of lamina dura passed through decreases, hence it may not be seen. Durbeck¹ goes so far as to imply that destruction of the lamina dura is pathognomonic in hyperparathyroidism. Further, he says that negative Calcium balance is manifested by depletion of the lamina dura. Goldman⁴ states it this

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way: quantity, not quality of bone determines the typical radiographic findings.

Structure of the Lamina Dura

There is no general agreement as to the constituency of the lamina dura. Goldman⁴ says the lamina dura is seen because of dense bone extending the full buccolingual width of the tooth. Ennis³ agrees with Pendergrass⁹, "The tooth sockets are lined with a thin plate of dense bone, which shows in the roentgenogram as a fine radiopaque line passing around the tooth." Manson⁶ did microradiographic studies of human mandibles with teeth in situ and states, "The bone of the socket wall has the same mineral content as neighboring bone, and there is no evidence at all of the presence of a special bone tissue with a higher mineral content." He further concludes, "A similar white line can be produced as an artifact." Weinmann and Sicher¹¹ speak of "bundle bone" in connection with the tooth socket and indicate that greater density is found therein. Orban⁸ seems to have a similar view, but says that the term lamina dura refers to the "dense appearance of the alveolar bone proper in roentgenograms." It may be that these differences are more apparent than real, possibly due to semantics or various experimental methods.

Radiographic Interpretation and the Lamina Dura

The interpretation of presence, absence, thickness, thinness, continuity, quality, and quantity of the lamina dura in radiographs is said to be of value in diagnosing many diseases and conditions.

McCall and Wald⁷ say that thick-

ening of the periodontal membrane occurs in periapical infection, at the expense of the lamina dura, which resorbs.

Elfenbaum² directly correlates the continuity of the lamina dura and periapical infection. He also states that an impacted tooth without a lamina dura has no functional stress and its eruptive ability is lost. Further, a non-functional tooth that has erupted, but has no antagonist, suffers a loss of lamina dura, in apparent reaction to a lack of stress. On the other hand, an unerupted tooth that has a thick lamina dura would be considered to have a high eruptive potential. In addition, he points out that in Orthodontic tooth movement, resorption occurs in pressure areas, apposition occurs in tension areas. The lamina dura is said to be deficient or lacking in Paget's disease and hyperparathyroidism. Cases are also shown where lamina dura is lacking in diabetes and albuminuria.

Hutchinson⁵ says that the lamina dura may be absent in cavernous hemangioma of the maxilla, indistinguishable in fibrous dysplasia of bone, missing in hyperparathyroidism (especially around the root apices), thinned in chronic rarefying osteitis, and lost in periodontal disease. In regard to periapical infection and the lamina dura, he says, "The presence of an unbroken lamina dura around the apex of a root is strong evidence that infection is not present, while a break in its continuity usually is indicative of osteitis."

When one studies the manifestations of systemic disease as seen in dental radiographs, one must inevitably read the works of Stafne.¹⁰ He relates periapical infection to

breaks in the lamina dura. In the case of a retained root, an intact lamina dura and a normal appearance of the surrounding bone makes infection a remote possibility.

Stafne¹⁰ says that the lamina dura may be almost completely obliterated in Cushing's disease and Hypercortisonism.

In Hyperparathyroidism, he says, "... the lamina dura may be completely or partially absent depending on the severity of skeletal involvement, and the teeth, in which there is no alteration in radiographic density, stand out in marked contrast to the radiolucent demineralized bone." If the disease is successfully treated, the bone will return to normal except where extensive fibrosis has occurred.

Stafne¹⁰ also cites a case of Osteomalacia in a patient suffering from Sprue, in which there is a uniform decalcification and demineralization, and the lamina dura is only faintly distinguishable. The lamina dura is also cited as being absent in cases of Renal Rickets and Renal Osteodystrophy. In Senile Osteodystrophy, bone density is decreased, the cortex is thinned, the trabeculae are sparse, and the lamina dura is deficient.

In discussing Paget's disease, Stafne states that osteolytic lesions occur in the areas around the roots of the teeth and the teeth involved will not have any lamina dura. Also, it is said that the lamina dura never returns in Paget's disease.

Scleroderma is also cited by Stafne. In this disease, the periodontal membrane space enlarges at the expense of surrounding bone. Hence, first there is resorption and destruction of the lamina dura. Later, there is sclerosis and a wider lamina dura. That there is a predilection for the posterior teeth is also pointed out.

Summary

A review of the literature pertaining to the significance, structure, and radiographic interpretation of the lamina dura is presented. It appears that the quality, quantity, and continuity of the lamina dura may be of diagnostic value in several local and systemic diseases and conditions. Further investigation is suggested to enhance this phase of dental radiology.

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Systemic Considerations In Endodontic Therapy

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Generally, periapical pathosis can be resolved by following certain basic principles as summarized by the Second International Conference on Endodontics in 1958. The principles are as follows: (1) aseptic technique; (2) biomechanical cleansing of the root canals for the removal of the irritants; (3) sterilization; (4) filling of the root canal by means of a non-resorbable material in conjunction with a solid core such as gutta percha or silver cone. These procedures have proved adequate for successful resolution in a great percentage of the cases. However, in some cases, these empirical techniques have proved inadequate and failures continue to occur.

A more sophisticated understanding of biologic principles of living tissue and the systemic factors that relate to the diagnosis and treatment are often required where optimum results are expected. Cheraskin (1957) categorizes over 200 systemic diseases whose signs and symptoms are manifest in the oral cavity. He observes that disease in general is a function of the systemic substrate and local irritating factors. The impact of such systemic possibilities places in sharp focus the medical history of the patient in direct relationship to the diagnosis and therapy in endodontics or any other dental procedures.

In certain cases, periapical lesions may be produced as a result of one or more local irritants in a healthy individual. In others, the lesion may be the result of the inter-action of a local irritant and an appropriate systemic substrate. A careful and accurate medical history is therefore essential. Even though a systemic disease has been established, it does not necessarily mean that the disease in question has a cause-and-effect relationship. The systemic disease may, however, influence the local factor to cause the periapical reaction or interfere with the healing potential. It may, on the other hand, produce a periapical lesion that is unrelated to pulp pathology. In addition, the presence of a systemic disease may frequently modify the procedure of treatment.

The following case reports and discussion will attempt to illustrate the relationship of the local and systemic etiological factors as they relate to the manifestation (and treatment procedures) of certain endodontic problems.

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RADIOGRAPHIC EVIDENCE OF SYSTEMIC FACTORS

Periapical lesions unrelated to pulp pathology have been reported by numerous investigators. The lesions usually manifest themselves upon roentgenographic examination as areas of rarefaction. These may be of local or systemic origin. One frequently sees solitary lesions in various parts of the jaws or other parts of the skeletal system that are of systemic origin. Infrequently, lesions may appear above the apices of teeth (Calman, 1952), and an erroneous diagnosis of periapical pathology can be made. This can occur particularly if only one roentgenogram is taken of the tooth in question. A full mouth roentgenographic examination aids in detecting systemic diseases and establishing a proper diagnosis.

Fibrous dysplasia, a disease of unknown origin, has been presented in the literature under many synonyms. Sicher and Weinmann (1954)

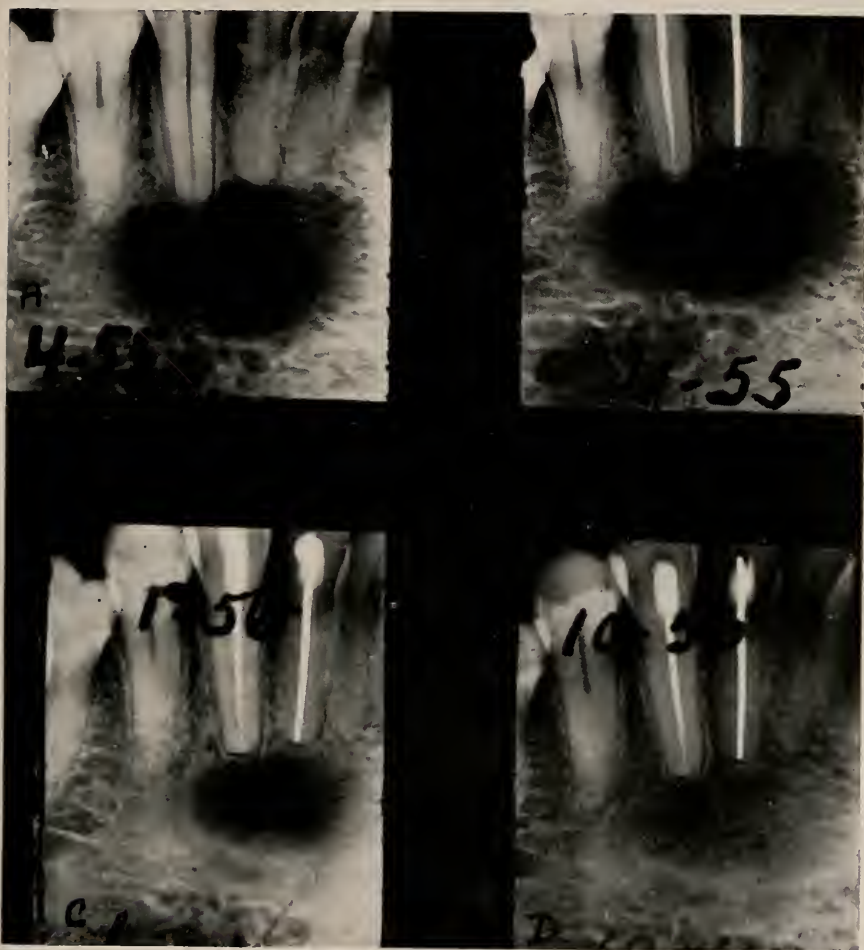


Fig. 1—Case 1. Fibrous dysplasia. A. Diagnostic x-ray prior to treatment. B. X-ray following endodontic treatment. C. Seven months post surgical treatment. D. Eighteen months following initial treatment.

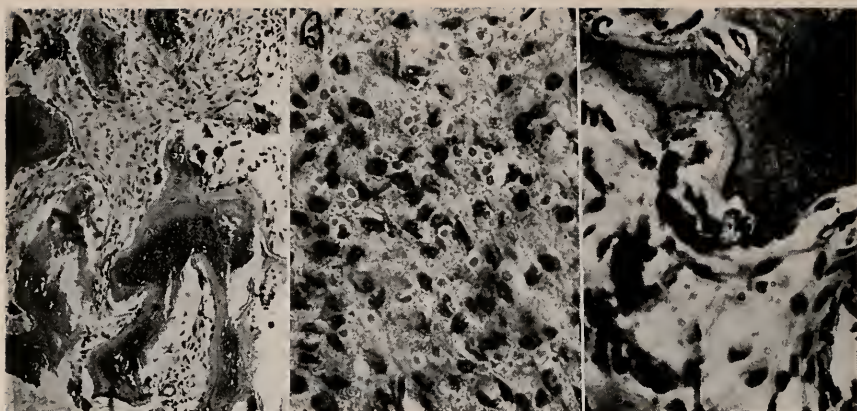


Fig. 2—Case 1. Fibrous dysplasia, histopathologic section. A. Note the transition from the cellular fibrous tissue into an eosinophilic homogenous material which resembles osteoid. Some areas show newly formed bony spicules. X 100. B. Note the elongated spindle shaped cells which show fairly large oval nuclei that are quite uniform in appearance. X 450. C. Scattered through the stroma are many spicules of new bone which interlace and appear to arise from the cellular stroma. These spicules of bone are incompletely calcified and are bordered by an almost continuous row of rather large stellate cells. The bony spicules show irregular calcification. X 450.

consider the term 'fibrous dysplasia' as meaningless since the replacement of bone by loose connective tissue is not unusual in cases of bone infection, hormonal imbalance, mechanical trauma, and tumor formation. The following case is an illustration of a difficult diagnosis and a need for revision in dicta as to treatment of fibrous dysplasia.

Case Report

A 39 year old female was referred for endodontic treatment. She complained of tenderness on the lingual side in the region of the mandibular left canine. She first noted swelling about three weeks prior to the office visit, with pain evident during the preceding week. There was no history of trauma or systemic disease.

Radiographs revealed an oval area of rarefaction extending laterally from the mesial aspect of the first premolar to the midline; vertically, from the root apices mid-way the inferior border of the mandible (Fig. 1).

The canine and second incisor did not respond to thermal stimulation, the electric pulp tester, or test drilling. The adjacent teeth responded normally. The canals showed no vitality and the pulps appeared necrotic. Aspiration revealed no fluid in the rarefied area.

A tentative diagnosis of apical granuloma was made. The teeth were treated endodontically and the lesion curetted from the labial side. The tissue specimen was sent to the pathology laboratory and the report was fibrous dysplasia (Fig. 2). Healing was uneventful with complete bone regeneration within thirteen months.

Discussion

This case illustrated Sicher and Weinmann's point that fibrous dysplasia manifests itself in cases of inflammation or infection. Since no pre-

operative culture was taken, it cannot be assumed that infection was present. Although not substantiated by the history, it may have been of a traumatic nature. Another possibility is an extension of the systemic lesion which may produce an interference in the blood supply to the pulp with ultimate pulpal necrosis (Östby, 1958). Thus a systemic disorder may produce pulpal pathosis.

Most of the cases as reported in the literature state fibrous dysplasia need not be treated, and that in time, the fibrous area recalcify. In this case the lesion became larger and eroded the bone. The swelling was perhaps a periosteal reaction from the erosion of the bone. In addition, the irritants within the root canal may have been responsible for enlarging the fibrous lesion. Thus it appears that there may be an interplay of a systemic condition affecting a local tissue and the local reaction affecting the initial systemic lesion. This case illustrated the need for histopathological reports for more definitive diagnosis.

Erroneous conclusions should not be drawn from this case. If the teeth give evidence of vitality, and if there is no clinical evidence of any disturbance, the case should be observed for a period of time. In most instances of fibrous dysplasia, the areas do recalcify and no treatment is indicated.

LOCAL FACTORS

Besides the systemic disorders that exhibit periapical lesions unrelated to pulp pathology, there are local disorders that also produce areas of rarefaction, such as giant cell tumor, traumatic cyst, or globulo-maxillary cyst. The following case illustrates the need for proper diagnosis where endodontic therapy is not necessary to resolve rarefied areas in the periapical region.

Case Report

A seventeen year old female originally sought dental service to correct an overlapping right maxillary cuspid over an adjacent second incisor. The radiographs revealed a lesion that extended from the midline to the anterior wall of the antrum (Fig. 3). All teeth were vital and asymptomatic.

A diagnosis of globulo-maxillary cyst was made and treatment consisted of making a surgical window in the apical region between the canine and second incisor. Cystic fluid was evacuated, and the space packed with rubber drain (Sommer, Ostrander and Crowley, 1958). This was continued for several weeks. Subsequently, an acrylic obturator was made to maintain the opening. After twelve months, the lesion was markedly reduced in size. The obturator was discarded and healing continued until resolution was completed. The pulps maintained their vitality.

Discussion

A diagnosis of globulo-maxillary cyst is made because of location, the displacement of the roots, and the vitality of the teeth. A roentgenographic

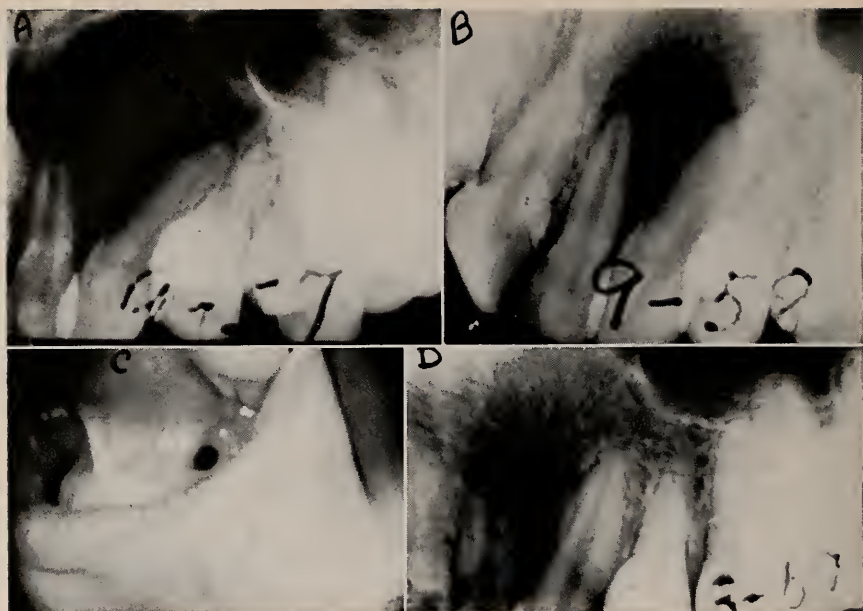


Fig. 3—Case 2. Globulomaxillary cyst. 3. Note area of extensive rarefaction in initial diagnostic x-ray. B. One year following initial treatment showing reduction in size of area. C. Shows surgical window in which obturator was placed. D. Note complete osseous regeneration.

examination alone is not sufficient. This case illustrates that as a result of a proper diagnosis, no extensive surgery was necessary, and no endodontic therapy was required.

LOCAL AND SYSTEMIC FACTORS

In certain cases, periapical lesions can be produced as a result of an inflammatory reaction to the irritant within the root canal. The tissue cannot distinguish the nature of the irritant. Periapical reactions may be intensified in the presence of systemic disease if there is an increase in concentration or a compounding of irritants, such as instrumentation, dispersion of micro-organisms, and chemical irritation from agents within the root canals. Moreover, the lesion may persist and healing may be impaired long after the irritants have been removed; whereas with the absence of systemic disease, healing takes place after the removal of the local irritants. The following case illustrates the inter-relationship of local factors and systemic disease. The detection and the correction of the systemic disorder produced prompt healing of the periapical tissues.

Case Report

A 61 year old woman was referred for endodontic treatment of a right mandibular second incisor. Examination revealed that the tooth was utilized with the other second incisor as bridge abutments. The tooth was slightly tender upon percussion. The roentgenogram revealed a small area

of apical rarefaction. The patient herself gave a negative history of any systemic disorder.

Routine endodontic procedures were instituted. Following a negative bacteriologic culture, the patient returned within one week for completion of treatment. After radiographing the trial silver cone, extensive bone loss around the entire perimeter of the tooth was noted. The rarefaction extended from the mesial aspect of the adjacent canine and approximated the left second incisor (Fig. 4). The tooth at this time was asymptomatic.

Upon more intensive interrogation, the patient's daughter revealed that her mother was a diabetic and notoriously lax in her maintenance of insulin and diet as prescribed by her physician. The case was then completed and the patient was referred to her physician for proper dietary

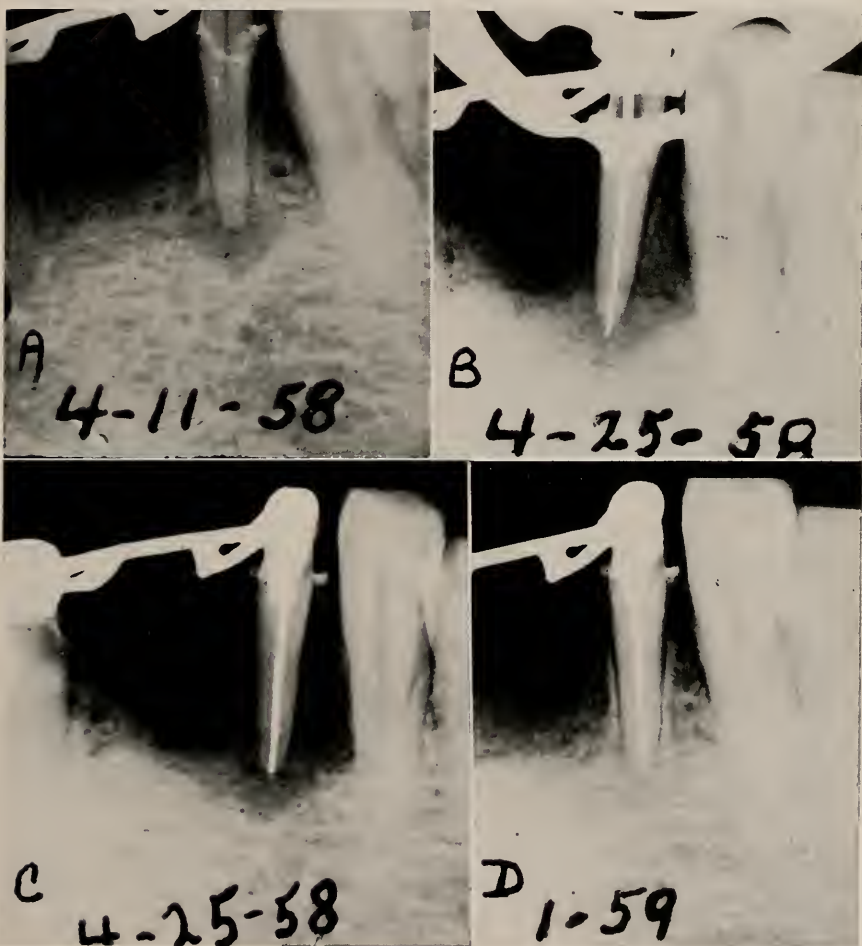


Fig. 4—Case 3. Diabetic patient. A. Diagnostic x-ray showing apical rarefaction. B. X-ray showing extensive area of periapical rarefaction two weeks after initial treatment. The canal is sterile and a trial silver cone is evident. C. X-ray directly following root canal filling. D. Nine months following initial treatment showing complete regeneration of bone and lamina dura.

and insulin control. Within a month, there was evidence of bone remineralization. Within nine months resolution was complete. During this time she had been under close medical supervision.

Discussion

An interesting feature of this case was the rapid onset of the bone changes following standard endodontic procedures. Within fourteen days, there was marked bone resorption. This may be attributed to the compounding of local irritants that were delivered to the tooth in the course of treatment.

It has been shown in human specimens by Seltzer and Bender (1960) that the mere removal of the pulp produces an inflammation in the periapical tissues. The same investigators have shown in dogs that with the removal of the pulp, followed by irrigating and sterilization drugs, there is a gradient increase in inflammation in the periapical area. The inflammatory response was less with one irritant than when several irritants were introduced.

In the presence of this systemic disease, diabetes, the host-irritant-relationship was disturbed. Thus there was an exacerbation of the inflammation. When the resistance of the host was improved by proper insulin control, prompt healing took place.

IDIOPATHIC CONSIDERATIONS

There may be some cases in which local and systemic factors cannot be detected as the cause of pain or periapical pathosis. Systemic changes may occur in healthy patients with periapical lesions, but these changes are so subtle that present day laboratory or clinical procedures will not detect them. The following illustrates a case of idiopathic resorption.

Case Report

A 38 year old woman was referred because of a continuous complaint of pain both before and after endodontic treatment of her maxillary left first incisor. The radiograph indicated an apical rarefaction. She gave no history of a systemic disorder. Clinical findings were completely negative. The canal appeared under filled and poorly condensed laterally (Fig. 5).

No exudate or bleeding was noted when the previous filling was removed and the tooth retreated. After three months, the pain persisted. An apical curettage was performed, and the root end was smoothed. The pain continued after several months, and the patient insisted that the tooth be extracted by the referring dentist.

Examination of the extracted tooth showed apical resorption with the gutta percha extruded through the apex as a result of the root resorption. Following extraction, the pain disappeared.

Discussion

Apical root resorption has been observed prior and/or subsequent to endodontic treatment. The etiology is unknown nor is the prognosis predictable. Inflammation has frequently been identified with resorptive

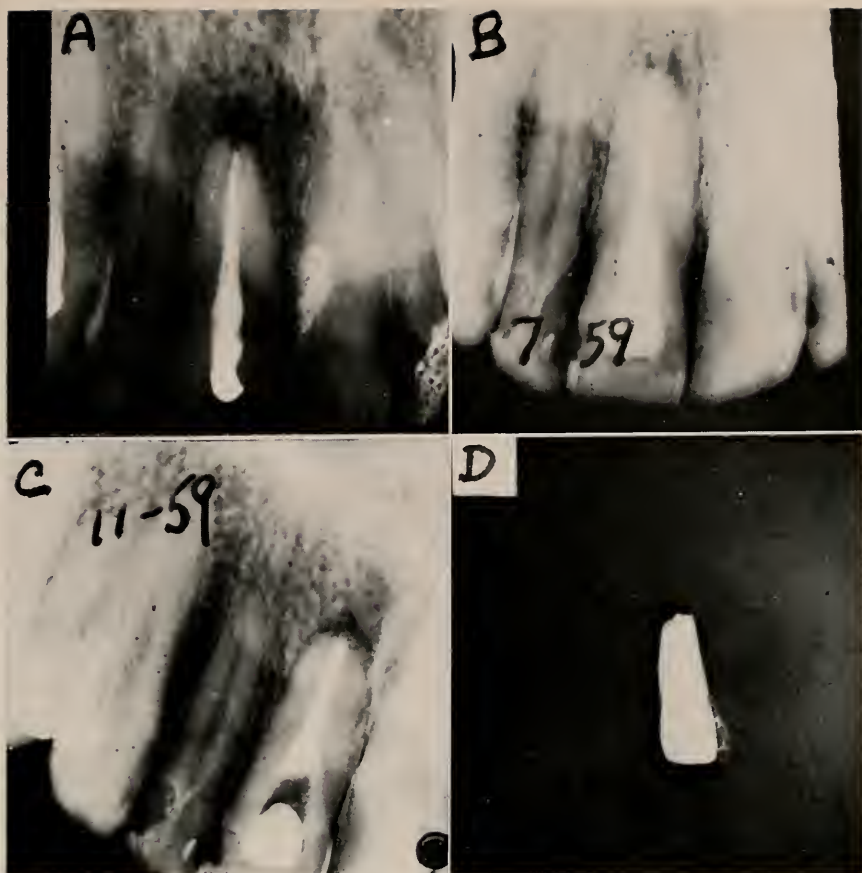


Fig. 5—Case 4. Apical resorption. A. Diagnostic x-ray showing incompletely filled canal, April, 1958. B. X-ray showing retreatment in July, 1959. C. X-ray directly following apical curettage in November, 1959. Patient was still complaining of pain. D. Photograph of extracted tooth four months after curettage. Patient still complained of pain and requested extraction. Marked apical resorption is exhibited on photograph of extracted tooth.

processes. Henry and Weinmann (1951) concluded that trauma was the most frequent cause and the apical third the most common site of root resorption. Seltzer and Bender (1960) have shown that apical resorption and recalcification occur during the process of inflammation. Frequently the resorptive and calcification processes can be observed adjacent to each other. Although there was apparent evidence of bone healing, the persistent pain in this case, despite the curettage, cannot be explained.

RELATION OF SYSTEMIC DISEASE TO DENTAL PROCEDURES

While the importance of the medical history has been well recognized in medical circles, in dentistry it has not been sufficiently appreciated. In most instances, the medical history is inadequate. The clinician should appreciate its importance and its value to the course of treatment. Many clinicians recommend that if a patient has a systemic disorder, the tooth

in question be extracted. Comprehension of the medical history may often reveal that endodontics, not exodontics, is the treatment of choice for many individuals suffering from various diseases. Thus endodontics may benefit the health of the individual as well as preserve the teeth.

CONCLUSION

An effort has been made to correlate some of the systemic factors as they relate to endodontics. The relationship is not fully understood and frequently is not appreciated in treatment planning. It becomes most important to determine the medical history of the patient so that the treatment of choice may be applied to give the patient maximum protection.

It is clear that a greater responsibility falls upon the dental profession to evaluate and comprehend from scientific progress the knowledge that provides for the retention rather than the removal of the natural dentition. There appears no valid evidence to indicate that man needs to suffer the loss of his dentition from causes other than disease and/or traumatic injury and, in numerous instances, these causes can be treated or prevented. Since the goal of dentistry is the retention of the natural dentition in a healthy state, it seems somewhat incongruous that much of the knowledge gained from research has failed to reach so many of our colleagues. This Federation may well be the means of eradicating this void in the progress of dental science.

Summary

The limitation of empirical techniques in endodontics is demonstrated through the influences that the systemic being may have on the etiology, pathology, and resolution of periapical lesions.

An attempt is made to demonstrate the significance of a better understanding of the biologic principles of living tissue and the application of such knowledge in the diagnosis and therapy in endodontics.

The importance of the information gained from a thorough medical history of the patient may be the difference between success and failure in an endodontic case.

Where systemic disease is present, endodontics may well be the treatment of choice where such treatment is possible.

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Two Faced Dental Image *

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* Presented at Dental Health Conference September 27, Austin, Texas

WE ARE GRAVELY CONCERNED about our Public Relations and we should be concerned. Good public relations is the very life blood of a profession. Without good public relations, a profession's capacity to serve the public withers into nothingness. Just what do we mean by having good public relations or by having a good public image? We simply mean that we want to be regarded very highly in public opinion. We want the public to have implicit faith and confidence in us. We want the people to know that our recommendations for them are unselfish and for their own good. We want them to know that our profession is something special. We want them to see us as we want to be seen. If we want the public to have an image of us as dentists that is ideal, then it follows that we must conduct ourselves in a manner that is consistent with that ideal

image. There are certain characteristics that any trade or profession must have in order to receive a favorable place in public opinion. You know these as well as I — honesty, efficiency, promptness, neatness and fairness in charges. What do we expect of our plumber or watch repairman or automobile mechanic? We expect them to give us service with reasonable promptness, that they tell us with accuracy what our needs are, that they satisfy our needs efficiently and economically. In other words, we want them to be good at their trade and we want their services done promptly and as reasonably as possible. Should we expect anything less of dentistry? We know what we expect of our physician and our minister. We know that the professions should be head and shoulders above trades in public opinion. We know that the public expects a great deal more of

a profession than it does a trade. A profession is even referred to as a calling. Certainly a professional man should be everything good that an honorable tradesman should be and then he should be more — much more. He must be kind and compassionate. He must remember that he is dealing with humanity—with human tissue, with human emotions—he must be gentle and tender.

As members of the dental profession, we are members of the health profession, and as a member of the health profession, we are closely related to and identified with our ally, the medical profession. I think our problem today is not so much to create a sense of appreciation of the health professions by the public as it is to preserve and maintain the dignity and prestige we have always experienced. We in the health professions have certain things in common with some of the second and third generations of American wealth. They came into this world as the heirs of tremendous wealth, which they did not earn, the wealth being the product of the finest political system in the history of the world. They seem to be taking socialistic and liberal attitudes that appear to be dedicated to the desecration of the system that made such an inheritance possible. We in the health professions, on the other hand, came into this world, so to speak, as the heirs of a tremendous wealth of respect—which we did not earn, but which was earned for us. Sometimes I think that we in the health professions are a little spoiled—that we take for granted our cherished position in society, forgetting that this position was earned for us by our forebears with their dedication, love and labor. If

we are not careful, we will desecrate and squander our rich inheritance, too. I remember with clarity a scene from a movie—one of the Andy Hardy movies, when Andy, the son, was complaining to his father, Lewis Stone, who was Judge Hardy in the movies. He was complaining because his sister didn't show him the proper respect, and the Judge told his son that he had found that people generally got respect when they deserved respect.

It has long been my contention that making money is not the primary objective of a dental practice, but should be the by-product of a healthy and happy practice. Let me quickly add that I think there is nothing illegal, immoral or unethical about receiving ample reward for one's professional efforts. However, it is my opinion that the very high plane of public opinion for the professional man was not developed on any other basis than that of service above self and that the welfare of the patient is the number one consideration. We will do well to reflect from time to time on Hippocrates and upon the Hippocratic Oath. According to this oath, the physician places the interest of his patient above all other considerations in his practice. He keeps in strictest confidence all that he observes and learns during his visits to the home of the sick. He confines his practice to the procedures for which he has been trained, and he pledges himself to teach as well as practice his art. These rules still govern the practice of medicine and certainly make a wonderful guide for us in the practice of our profession today.

The position of respect that we enjoy today is due largely to the

fact that our predecessors practiced in accordance with this oath, that service above self has truly been the motto — and due to the gigantic contribution to American life made by the family doctor. The family physician was used for medical problems and emergencies to be sure, but he also knew the innermost details of family life and of the interpersonal relationships that existed within the family. He was internist, surgeon, psychiatrist, family counselor, business adviser, etc. He had the closest of relationships with his patient so that not only did he know them, but also they knew him, so that his unselfishness, his desire to serve, and the many many facets of necessary service that he supplied collectively earned for him the well deserved position of esteem and almost reverence that he received. Today we see the most marvelous advances that the world has ever known in the health professions. It is rare nowadays for a family to have a family doctor— instead, they have a staff of very capable and efficient medical scientists, a group of specialists, each extremely capable in his specialty.

I think we will all agree that the quality of the service is superb. However, as our specialties have developed, in medicine particularly, and, to a lesser extent, in our own profession, as the degree of specialization has increased, the nature of the services rendered has become progressively more impersonal — at least in many instances. Oftentimes, instead of the familiar, understanding, sympathetic and kind personality, there has been a cool, calculating, methodical, precise, almost mathematical personality, and the patient many times feels that he

is considered just an academic problem to be evaluated, not a real person with feelings and emotions. He wants to be assured and reassured and he very sincerely and genuinely wants a professional man with warmth and sincere interest in his personal well being. This aseptic coolness and efficiency undoubtedly leads to fine results, but, unfortunately, many times it contributes nothing that will warm the soul or will light the fires of friendship, of respect, of admiration, or create the esteem and prestige that professional people have always enjoyed. This closeness and devotion between doctor and patient is really where a good public image is created, and I say in all sincerity that we must maintain this relationship with its warmth and its mutual respect and concern if we hope to deserve and to keep the respect that we have had for so many years.

There is another area that I think has a great bearing on the public's opinion of our profession. In the past, the professional man with all of his warmth and understanding was notoriously a very poor business man. As a result, he suffered oftentimes to a rather marked degree from the standpoint of finance. As time went on, we became aware of our shortcomings in the field of finance and began to apply business methods to the conduct of our practices. We even developed a special group of people — our practice management experts. I think our practice management people have made tremendous contributions to our profession. In general they agree on basic procedures that make for a more efficient, productive and lucrative practice — they usually agree that we should follow certain

rules — that we should begin with a complete examination and history, that we make a good diagnosis and plan the treatment well—that we make a strong and positive case presentation and fee presentation — that we should work out an efficient appointment schedule, and finally, that we should have a good recall system. Now I agree with all of these and I think they are extremely important. I think they are basic and are the foundation of a good practice. It is my belief, however, that you cannot establish a sort of master check-off list and subject each patient to a ritualistic case presentation and make a big deal out of every case. These basic rules of practice management are instruments, they are ingredients that should be used in their proper place and should be diluted or modified with copious quantities of common sense, tact and diplomacy — they are like dynamite — when used properly, helpful, but when applied improperly, destructive. I had one patient tell me that she went to a dentist in pain and was required to give four credit references before the doctor would see her. I have heard patients comment, and I am sure that you have, too, on numerous occasions, where they have sought relief from a certain condition, that the doctor would hardly listen to their complaints because he was so occupied in making a complete survey and presenting plans for extensive dentistry. If we do want to present complete and comprehensive plans for a patient, let's be tactful to the extent that we first resolve the problems motivating their visit to the office in the first place. You know, tact is a wonderful lubricant in personal relations

— someone has said that tact is that quality that makes a man who has accidentally entered an occupied Ladies Rest Room to say "Oh, pardon me, *sir*" as he hastily retreats.

Yes, we are extremely interested in what people think about us as individuals and as a profession. Actually, how they feel about us is largely dependent on how they *think* we feel about them. The course of history has never been determined by what is true but always has been determined by what people think is true. Likewise, the opinion people have of our profession is not necessarily governed by what we actually feel, think and do; but is more likely governed by what they *think* we feel, think and do. No matter how honorable and unselfish our attitudes may be, if our patients feel that we are more interested in business arrangements and finance than we are in them—if they think we are not sincere—then we have failed to go into orbit as far as good public relations are concerned. So again, when a patient comes in for the resolution of a specific situation and we know that for *his* best interests extensive planning and care is needed, we must not only be tactful, we must be diplomatic enough to lead—not push—the patient's vision to the point where he sees that the plans are for *his* best interests and that *he* will receive the primary and maximum benefits.

The Dental Image has two faces — one face is the professional face, which I have attempted to discuss and before I leave that face of the image, I would like to say that those of us who have experienced a critical illness wherein one of our loved ones has been the patient in a truly tense and grave situation,

know the kind of professional man and professional attitude that we appreciate.

The other face of the Dental Image is the non-professional face. This is the face of the citizen, the Christian, of the family man. Certainly we have responsibilities as a citizen that are apart from our duties as dentists. If I do nothing else tonight but motivate you to read an article entitled "A Newspaperman Looks at the Dentist's Image," I will be satisfied. This appeared in the March 1963 issue of the Journal of the A.D.A. The author is the editor of the Saginaw, Michigan, News. He points out that the public thinks dentists are interested mostly in filling cavities and bank accounts—he points out in a very diplomatic and inoffensive way our shortcomings in community service, civic responsibilities such as supporting our Chambers of Commerce, of our shameful deficiency in support of United Funds and our gutlessness in not being aggressive and not being identified with fluoridation issues, etc. Please, those of you who haven't read this article, please do read it, and if you have read it, read it again. You see, we *do* have responsibilities other than dental responsibilities, and if we discharge them properly, there is the very direct suggestion that we also discharge our professional duties properly—if we are laggards in our civic responsibilities

then it is logical to assume that we are also laggards in our professional responsibilities.

Our hope is that the public—our patients—will come to realize that dentists are good people, motivated by worthwhile idealistic attitudes and worthy of respect. Our attitude towards each other is most important. The very best friends I have in this world are dentists. This is proper and as it should be. We are a group of people with a great deal in common. We have similar educational backgrounds. By and large we have the same problems and the same solutions. We certainly should have a great deal of compassion and understanding for each other. If we don't have a sincere and genuine respect and admiration for our fellow dentist, how can we hope or expect the public to? Whether we realize it or not—whether we will admit it or not—we *are* brothers in the fraternity of dentistry. Everything that is good that happens to one of us happens to each of us, and also every time something bad or unpleasant happens to one of us, it happens to all of us. It is like the old proverb: "In the distance I saw what I thought was an animal. As it came closer, I saw it was a man — when it came very close—lo, it was my brother."

1918 SKILLMAN
DALLAS, TEXAS

The Periodontal Abscess

*WALTER T. McFALL, JR., D.D.S., M.S.D.

THE PERIODONTAL ABSCESS presents a vexing clinical problem both in terms of differential diagnosis and of treatment. Even more important is the ultimate fate of the tooth or teeth so involved. The purpose of this paper is to examine the features of this lesion and offer some solutions towards its eradication.

Pathology

Basically the periodontal or lateral abscess represents a localized inflammation of the purulent type in the attachment apparatus. Some authors^{1, 2} make a distinction between this lesion and the gingival abscess which is confined to marginal tissues. The gingival abscess represents an acute inflammation of the marginal soft tissue and does not usually destroy the deeper supporting structures. It is commonly associated with the presence of a foreign body.^{1, 2}

The periodontal abscess represents a condition usually associated with a pre-existent periodontal pocket. As long as drainage is possible through the orifice of the pocket there is no abscess. If the pocket's opening becomes sealed then drainage is inhibited. The purulent material continues to increase and seeks escape. In this manner the cortical plate of bone may be destroyed and the abscess

may penetrate the overlying soft tissue creating a swelling or a fistula.

Diagnosis

Although periodontal abscesses may be of either the chronic or acute type, the latter form predominates and more often causes the patient to seek dental service. Most commonly the acute abscess is accompanied by pain, tooth sensitivity and mobility, regional lymphadenopathy, and, in some cases, fever. Clinically, the gingiva in these areas exhibits an edematous and inflamed surface. Purulent exudate can usually be expressed from the gingival opening of the pocket. Generally an abscess is associated with a pre-existing periodontitis.

The chronic abscess often presents a patent fistula surrounded by some nodular tissue. Probing of the opening of the sinus may produce some exudation, and the patient may report an occasional oozing from the area. These chronic lesions are often surprisingly symptomless. Frequently the only subjective responses elicited from the patient is a feeling of the tooth being high or an occasional tenderness in the region. Pain is seldom reported. Chronic abscesses may subsequently become acute at a later period.

Since the periodontal abscess is associated with occlusion of the

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opening of a periodontal pocket certain clinical situations lend themselves to such a pathological process. Narrow, deep, intrabony pockets can easily become blocked and are prone to abscess formation. Often the complicated path of these narrow pockets may result in the appearance of the abscess on a surface other than where the occluded opening occurred. Pockets involving the bifurcation and trifurcation areas of the teeth are also common abscess sites.

Foreign bodies in the form of toothbrush bristles, impacted food, and dental materials have often been implicated in the formation of abscess formation.^{1, 2, 3} More frequently the lesion tends to occur in association with deep calculus plaques.

Radiographic findings are often disappointing. Indeed in the early phases of an acute lesion they are totally lacking. With chronicity the radiographic picture is likely to be that of a radiolucent area lateral to the surface of the root. It must be stressed that the radiograph is only usable as supportive evidence to the clinical diagnosis.

Differential Diagnosis

Both apical and periodontal abscesses may result in the presence of a swollen area or a draining fistula. Location of the opening may be of some help in differential diagnosis. Periapical abscesses more commonly tend to break through the alveolar mucosa while periodontal abscesses are usually located nearer the gingival margin. Location is not definitive, however, since in advanced periodontal lesions the abscess may invade quite deeply.

The radiograph provides some aid

in the differential diagnosis because of the relatively late development of radiographic changes with the periodontal lesion. Apical changes on the radiograph should raise the suspicion of pulpal pathology.

In the final analysis differentiation rests primarily on clinical findings such as tooth vitality, caries, and presence of periodontal disease.

Therapy

Treatment of the periodontal abscess is determined by several factors including the degree of destruction, the location of the lesion, the acuteness of the abscess, and the treatment plan for the tooth so involved.

During the acute phase the most important considerations are to establish drainage, relieve pain, and reduce the spread of infection. If the abscess has pointed, drainage is best accomplished by a deep, semilunar incision below the abscess. This is accomplished with a sharp scalpel blade using topical anesthetic. Curettage with small, sharp instruments through the pocket opening should also be affected. This also results in establishing an area of drainage.

Pain relief is accomplished through the use of analgesics, warm saline rinses, and hot compresses. Antibiotic therapy may be instituted, particularly if fever or regional lymphadenopathy is present. If the abscess has not pointed, the use of hot compresses applied directly to the area may be of aid. Premature incision is of little value in this instance, but curettage through the pocket may help to limit the spread of infection. The occlusion should be carefully checked and trauma to the tooth minimized. This emer-

gency phase of therapy usually results in the prompt cessation of pain and the resolution of the acute signs of the abscess.

Comprehensive treatment of the resolved acute lesion or the chronic abscess requires other therapeutic measures. If minimal bone destruction has occurred and the lesion is confined to soft tissue, treatment may consist only of removal of the etiological agent and surgical intervention either through subgingival curettage or gingivectomy. If the lesion has involved underlying bone then other therapeutic methods must be instituted. Where it is feasible a flap may be laid, the infected granulation tissue removed, the root smoothed, and the flap carefully sutured back in place. In some infrabony pockets special techniques directed toward bone regeneration and new connective tissue attachment may be attempted.^{3, 4, 5} Occlusal adjustment or splinting of the involved tooth may be necessary.

Prognosis

The presence of an abscess by no means condemns a tooth to extraction. Abscess formation may represent the final manifestation of an extremely involved periodontal pocket, and the tooth may need to be removed. This is particularly true where extensive bone support has been lost. More commonly, the

periodontal or gingival abscess can be successfully treated and the tooth maintained. It has been observed that intrabony pockets associated with abscesses respond extremely well with institution of proper therapeutic methods.³ Where the lesion has been confined to soft tissues or where minimal bone destruction has occurred the prognosis is extremely favorable.

Summary

The best treatment for the periodontal abscess is prevention. Regular care with emphasis on early diagnosis, removal of irritants and proper oral hygiene will prevent abscess formation. While the appearance of an abscess constitutes problems in diagnosis, therapy, and prognosis, the results of proper treatment often produce gratifying results and maintenance of the tooth as a healthy and functional dental unit.

SCHOOL OF DENTISTRY
UNIVERSITY OF NORTH CAROLINA
CHAPEL HILL, NORTH CAROLINA

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KEEP YOUR SMILE

National Children's Dental
Health Week - Feb. 2-8, 1964



Your Dental Relief Committee: How it Works

*J. T. LASLEY, D.D.S.

“**W**HAT ARE the functions of the Relief Committee and how does it operate?”

This question is often asked the members of the committee. Recently it was asked by Mrs. Roy A. Miller, Jr., chairman of this year's Scrap Amalgam Drive and Mrs. D. Clyde Young, Jr., president, North Carolina Dental Auxiliary. No doubt this same question has been in the minds of many members of both the Society and the Auxiliary. For this reason, we will try to answer it in a concise manner, for space will not permit us to go into too much detail.

The Relief Committee consists of five members, one from each of the component districts. It is a rotating committee. Each member serves a term of five years. At the end of his five-year term, he is replaced or re-elected for another term by the President of the Society.

By custom, the committee elects its own chairman at its annual meeting which is held at the time of our state meeting.

Screening of Applicants

The most important function of the committee is the screening of applicants for relief grants and it is done in this manner:

1. All applications (new and renewal) for relief grants must originate with the district relief committee.

2. The district relief committee

appoints two investigators for the case and sends them the application form.

3. The investigators complete the required investigation, sign the application form, and return it to the district relief committee.

4. The district relief committee recommends approval or disapproval.

5. If approved, the application is signed by the district secretary-treasurer and forwarded to the central office.

6. The central office forwards the application to the state relief committee. If the committee approves the application, the amount of the grant recommended is specified and the application is forwarded to the secretary-treasurer of the North Carolina Dental Society for final disposition on the state level.

7. The secretary-treasurer then forwards the application to the Council on Relief of the American Dental Association for its approval.

Initial grants are made for a period of six months. Grants are renewed for a period of a year. The central office notifies the district relief committee concerned 60 days before a grant will be terminated. Applications for renewal of a grant are handled the same as a new application.

Your state committee functions as a team. The chairman never makes a decision on applications without the knowledge and consent of the

* Chairman, Relief Committee, North Carolina Dental Society.

committee members, and no applications are approved except by a majority consent. We only recommend to the A.D.A. We have never paid out money from the North Carolina Dental Relief Fund without an A.D.A. approval. Then it is on a 50-50 matching basis.

The Investigation

Here are some of the most important questions asked an applicant by the investigators:

a. Disability and employability of the applicant or members of the family.

b. Number of dependents.

c. Other relatives, brothers, sisters, or parents.

d. Total income of applicant and spouse. All income must be listed, regardless of source.

e. Anticipated expenses during the coming year.

f. All assets must be itemized.

g. Liabilities, bills outstanding and payable, must be shown.

h. Life insurance and other types of insurance must be listed.

The applicant must sign the application and state his age, and a statement by the applicant's physician must accompany the application.

Purpose

The purpose of the Relief Fund is to provide aid to the destitute dentist and his family. It is not the purpose of the fund to preserve the assets of the applicant, or to provide aid when there are enough assets to provide care by drawing on the assets. In short, it is not the purpose of the Relief Fund to provide continuing assistance to maintain the beneficiary in circumstances usual to their ordinary way of life. *It is not a pension or retirement fund.*

Income

Our income is derived from your purchase of Christmas Seals. Presently three-fourths of the amount we pay into the Seal or Relief Fund of the ADA is returned to the State; but our greatest source of income is from the Scrap Amalgam Drive conducted by the Dental Auxiliary.

Fills a Need

We believe the Relief Fund is filling a great need in the society and that each member should purchase seals, and above all show the good ladies of the Dental Auxiliary your appreciation for the great job they are doing by saving your scrap amalgam.

There are some dentists who do not have scrap amalgam. If this is the case, just make out a check and give it to the auxiliary member calling on you, or, if you prefer, you may send check to Mrs. Roy A. Miller, Jr., 1702 Lucerne Way, New Bern, N. C., chairman of the N. C. Dental Auxiliary Amalgam Drive this year. Supplement your scrap amalgam with a check.

From 1950 through 1962 a total of \$23,337.50 was paid out to 14 recipients by the North Carolina Dental Relief Fund, and the same amount by the ADA Relief Fund. We have received much more from the ADA Fund than we have paid in. This is a deserving purpose. Support it!

The Committee

Serving on the Relief Committee this year are: Dr. Walter E. Clark, First District; Dr. J. W. Heinz, Second District; Dr. J. T. Lasley, Third District and Chairman; Dr. S. L. Bobbitt, Fourth District; and Dr. J. M. Kilpatrick, Fifth District.

Campus News



KERMIT F. KNUDTZON, D.D.S.*

New Assistant Dean Appointed

The School of Dentistry has added a second assistant dean to its faculty, Dr. James W. Bawden. Dean Bawden was appointed September 1, 1963. He was named Coordinator of Dental Research and will assume the Directorship of the New Dental Research Center. Assistant Dean, William W. Demeritt remains in Charge of Operations and is also the Director of Clinics at the school.

Faculty News

Five new faculty members have recently been added to the School of Dentistry. They are:

Andrew D. Dixon, B.S., M.S., D.D.S., Ph.D., as a Professor of Practice Administration and Dental Science with teaching responsibilities in Anatomy.

William L. Graves, M.A., as instructor in the Department of Practice Administration and Dental Science. He will be engaged primarily in behavioral science research into problems of dental education.

Carl B. Holmes, D.D.S., M.P.H., has a joint appointment as Associate Professor of Public Health Administration, School of Public Health; and as Associate Professor in the Department of Practice Administration and Dental Science in the School of Dentistry.

Duane F. Taylor, B.S.E., M.S.E., Ph.D., joined the faculty as a Professor in the Department of Practice Administration and Dental Science. He is to head the dental materials program of the Research Center.

Don Warren, D.D.S., M.S., Ph.D., is an Assistant Professor of Prosthodontics. He will teach part-time in physiology at the School of Medicine and also coordinate the dental aspects of a joint medical-dental cleft palate rehabilitation program.

Two faculty members from the University of North Carolina School of Dentistry were guest speakers in November at widely separated scientific meetings. Dr. Donald W. Warren of the Department of Prosthodontics was the guest lecturer in Chicago for the American Speech and Hearing Association. He reported on his recent research in cleft palate speech problems. Dr. Roy L. Lindahl, professor and head of the Department of Pedodontics, addressed the faculty and senior dental students at the Universidad Nuevo Leon School of Dentistry in Monterrey, Mexico, and the Monterrey Dental Society. His subject was children's dentistry.

* Professor of Practice Administration and Dental Science, U. N. C. School of Dentistry.

Dr. Clifford M. Sturdevant, professor and head of the Department of Operative Dentistry at the University of North Carolina School of Dentistry spoke December 3-4 to the Greater New York Dental Meeting in New York City.

Administrative Officer Appointed

Mr. C. B. Thomas, Jr., an analyst in the University of North Carolina Personnel Department, has been appointed administrative officer of the million dollar Dental Research Center to be erected in Chapel Hill. Thomas is a 32-year-old native of Asheville and is a 1950 graduate of Lee Edwards High School there. His family lived in Greensboro while he attended UNC and while he served with the Navy during the Korean conflict. He was employed for two years with Dalton-Hege Electronics and was office manager temporarily for George A. Hormel Company, both in Winston-Salem. Until the Dental Research Center is completed, Thomas will maintain an office in the UNC School of Public Health.

Research Association Organized

The North Carolina Section of the International Association for Dental Research held an organizational and scientific meeting on Saturday, November 9 at the School of Dentistry. The group of approximately 35 which attended included dentists from Charlotte, Durham and Goldsboro, as well as local members.

Papers were presented by Dr. Clayton E. Wheeler of the UNC School of Medicine and Dr. Duane F. Taylor of the School of Dentistry.

The business meeting of the Section formally adopted a constitution and completed the election of officers by selection of Dr. James W. Bawden as Councilor.

An annual series of at least four meetings is planned. Exact dates will be announced later. Any individual interested in dental research is invited to attend the meetings and to join the group. Further details may be obtained from the Secretary, Dr. Duane F. Taylor, School of Dentistry, University of North Carolina, Chapel Hill, North Carolina.

KEEP YOUR SMILE

**National Children's Dental
Health Week - Feb. 2-8, 1964**



Dental Foundation of North Carolina, Inc.
Contributors (Dentists Only) to
Dental Research Building and Foundation Fund

The Board of Directors of the Dental Foundation of North Carolina, Incorporated, in its May 1963 meeting, voted to list the names of North Carolina dentists who had contributed to the Dental Foundation for any of its programs, since its initial organization in 1950. Contributors in the future also will be identified. Substantial contributions, too, have been made by dental manufacturers, dental supply companies, and dental laboratories, as well as friends of the profession. However, these latter cited firms or individuals are not listed here.

The Board voted "*to table*" the listing of the names and the sum contributed or pledged until this particular list had been published.

If any name has been omitted, and this may be possible with the changes in secretarial help and human error, please inform the Secretary of the Dental Foundation, Drawer 750, Chapel Hill, North Carolina.

The Board of Directors of the Foundation, the University Administration, and the faculty of the School of Dentistry are grateful to the dentists of North Carolina, the dental manufacturers, the dental supply companies, and the dental laboratories, for their continuing support of the Foundation. It is indeed the medium through which *Dentistry as a Profession* can and will move to a higher plane.

JOHN C. BRAUER

Secretary-Treasurer

Dental Foundation of North Carolina, Inc.

The following North Carolina dentists have contributed to the Dental Foundation for any of its programs since its organization in 1950:

C. E. Abernethy, Raleigh; David Abernethy, Hickory; G. S. Abernethy, Hickory; C. A. Adams, Jr., Durham; C. A. Adams, III, Durham; J. E. Adams, Sanford; Roy G. Adams, Hamlet; M. W. Aldridge, Greenville; G. S. Alexander, Kannapolis; W. E. Alexander, Robbins; F. O. Alford, Charlotte; Don L. Allen, Chapel Hill; L. S. Alspaugh, Greensboro; G. N. Anderson, High Point; J. M. Archer, III, Charlotte; J. L. Ashby, Mount Airy; Eli J. Attayek, Raleigh; F. G. Atwater, Greensboro; J. W. Atwater, Jr., Asheboro; T. W. Atwood, Durham; Mett B. Ausley, Warsaw; E. U. Austin, Charlotte; C. D. Bain, Dunn; E. D. Baker, Raleigh; L. P. Baker, Kings Mountain; R. N. Baker, Kings Mountain; T. P.

Baker, Kings Mountain; D. L. Ballard, Charlotte; L. B. Barber, Jr., Hendersonville; R. B. Barden, Wilmington; B. D. Barker, Chapel Hill; C. T. Barker, New Bern; O. C. Barker, Asheville.

C. A. Barkley, Winston-Salem; S. A. Barksdale, Charlotte; J. M. Barnhill, Hickory; M. D. Barringer, Charlotte; R. E. Barton, Chapel Hill; Thomas A. Baucom, Indian Trail; J. W. Bawden, Chapel Hill; W. C. Bean, Charlotte; B. F. Beasley, Kinston; D. L. Beavers, Winston-Salem; F. C. Beavers, Winston-Salem; D. H. Becker, Asheville; F. D. Bell, Raleigh; John T. Bell, Durham; V. E. Bell, Raleigh; D. L. Belvin, Charlotte; E. A. Bencini, High Point; R. H. Benfield, Charlotte; Jack Bennett, Winston-Salem; A. J. Biddell, Laurinburg; F. H. Biddell, Laurinburg; J. P. Bingham, Sr., Lexington; J. P. Bingham, Jr., Lexington; E. L. Bishop, Charlotte; Glenn Bitler, Raleigh; R. M. Blackman, Selma; W. W. Blackman, Salisbury; G. E. Blackwell, Salisbury; T. L. Blair, Winston-Salem; M. T. Blanchard, Leaksville; D. E. Bland, Wallace; Wilbur B. Bland, Troy; S. L. Bobbitt, Raleigh; I. A. Booe, King.

A. W. Bottoms, Canton; H. B. Bowden, Bethel; C. L. Bowen, Jr., Albemarle; H. X. Bowling, Durham; E. G. Boyette, Butner; J. D. Bradsher, Roxboro; C. A. Brady, Jr., Hickory; W. H. Branch, Raleigh; R. W. Brannock, Burlington; B. M. Brannon, Jr., Greensboro; L. P. Bratton, New Bern; J. C. Brauer, Chapel Hill; J. S. Brauer, Chapel Hill; B. A. Brawley, Mooresville; W. H. Breeland, Belmont; J. O. Broughton, Wilmington; C. Fred Brown, Hickory; H. D. Browning, III, Jacksonville; F. A. Buchanan, Hendersonville; T. C. Bulla, Asheboro; A. S. Bumgardner, Charlotte; L. F. Bumgardner, Charlotte; W. T. Burns, Chapel Hill; D. H. Butcher, Guilford College; L. H. Butler, Greensboro; W. B. Butler, Welcome; C. T. Byerly, Jr., Durham; R. T. Byerly, Winston-Salem; R. T. Byrd, Raleigh; T. H. Byrd, Jr., Raleigh.

W. M. Byrd, Sanford; Albert G. Byrum, Jr., Edenton; R. C. Burroughs, Jr., Charlotte; F. S. Caddell, Burlington; J. B. Caldwell, Greensboro; L. A. Cameron, St. Pauls; John K. Campbell, Chapel Hill; W. R. Campbell, High Point; C. Z. Candler, Jr., Asheville; C. W. Canrobert, Jr., Conover; R. A. Carnevale, Goldsboro; D. T. Carr, Durham; H. C. Carr, Durham; Larry W. Carroll, Chapel Hill; A. H. Cash, Charlotte; G. M. Cathey, Chapel Hill; W. R. Caviness, Durham; H. R. Chamblee, Raleigh; F. H. Chandler, Salisbury; M. E. Chapin, Chapel Hill; M. L. Cherry, Durham; Jack Chesson, Chapel Hill; R. J. Citrini, Durham; H. F. Civils, Kinston; C. F. Clark, Jr., Durham; Dwight L. Clark, Chapel Hill; W. E. Clark, Asheville; S. F. Clayton, Hickory; W. S. Clayton, Brevard; R. W. Clinard, Winston-Salem; A. P. Cline, Canton; A. P. Cline, Jr., Canton; N. Watt Cobb, Jr., Gibsonville; A. V. Coble, Burlington; R. D. Coffey, Morganton; Jay M. Collie, Greenville; T. G. Collins, Raleigh.

D. P. Conduff, Mount Airy; E. W. Connell, Mount Holly; A. J. Cook, Charlotte; D. S. Cook, Sr., Lenoir; C. S. Cooke, Wilson; J. R. Cooley, Charlotte; M. B. Corl, Concord; P. E. Cotter, Sanford; C. D. Couch, Jr., Charlotte; James L. Cox, Goldsboro; V. H. Cox, Winston-Salem; C. E. Crandell, Chapel Hill; J. C. Crank, Greensboro; A. W. Craver, Boon-

ville; D. H. Crawford, Asheville; H. K. Crotts, Winston-Salem; W. E. Crow, Winston-Salem; P. M. Cummings, Jr., Chapel Hill; A. C. Current, Jr., Gastonia; W. A. Current, Gastonia; W. C. Current, Statesville; Edwin Cuthrell, Thomasville; F. H. Daniel, Winston-Salem; R. A. Daniel, Jr., Roanoke Rapids; R. L. Daniel, Reidsville; L. M. Daniels, Southern Pines; T. H. Darden, Chapel Hill; William Davenport, Spruce Pine; H. A. Davis, Jr., Asheboro; J. V. Davis, Jr., Concord; William G. Davis, Winston-Salem; I. C. Dawson, High Point.

J. H. Dearman, Statesville; V. L. DeHart, Walnut Cove; E. C. Deibler, Sanford; M. C. Delbridge, Goldsboro; W. W. Demeritt, Chapel Hill; Bill Dennis, Salisbury; J. E. Derby, Tryon; Harry Dickey, Murphy; B. A. Dickson, Marion; C. C. Diercks, Morganton; J. S. Dilday, Durham; W. M. Ditto, Greensboro; J. H. Dixon, Charlotte; T. L. Dixon, Durham; D. P. Dobson, Chapel Hill; M. L. Dorton, Statesville; D. R. Draughon, Durham; W. R. Draughon, Durham; D. W. Dudley, Asheville; G. G. Dudley, Raleigh; J. F. Duke, Washington; A. H. Duncan, Morganton; N. J. Duncan, Winston-Salem; S. C. Duncan, Monroe; R. L. Eagles, Louisburg; Yates H. Eaker, Forest City; S. E. Eakes, Franklinton; Roy L. Earp, Raleigh; C. D. Eatman, Rocky Mount; E. L. Eatman, Rocky Mount; E. A. Eckerd, Mocksville; G. L. Edwards, Jr., Kinston; J. H. Edwards, Raleigh.

J. R. Edwards, Fuquay Springs; W. J. Edwards, Siler City; Z. L. Edwards, Washington; Z. L. Edwards, Jr., Washington; J. J. Elliott, Charlotte; W. W. Ellis, Mayodan; Myron H. Ennis, Goldsboro; D. J. Eure, Morehead City; M. R. Evans, Chapel Hill; J. W. Ezzell, Concord; R. L. Falls, Morganton; J. C. Farthing, Winston-Salem; R. E. Finch, Raleigh; S. J. Finch, Oxford; W. H. Finch, Jr., Henderson; J. C. Finn, Greensboro; J. H. Fisher, Rocky Mount; T. S. Fleming, Tarboro; D. J. Floyd, Dobson; M. M. Forbes, Lenoir; J. A. Foust, Jr., Statesville; W. F. Fowler, Charlotte; B. W. Fox, Charlotte; M. O. Fox, Elkin; N. D. Fox, Winston-Salem; J. B. Freedland, Charlotte; D. H. Freshwater, Morehead City; O. J. Freund, Winston-Salem; C. B. Fritz, Hickory; J. R. Fritz, Hickory; H. D. Froneberger, Gastonia; D. G. Frye, Jr., Hickory.

H. Fuerst, Rocky Mount; R. E. Gaines, Raleigh; R. H. Gainey, Fayetteville; F. G. Gaither, Statesville; A. J. Galarde, Charlotte; M. R. Garber, Albemarle; N. W. Garrison, Burlington; R. H. Gaskins, Jr., Jacksonville; S. P. Gay, Greensboro; R. A. George, Mount Airy; C. Don Gerdes, Asheville; J. W. Gibbs, Charlotte; R. H. Gilbert, Kinston; W. B. Gilbert, Jr., New Bern; F. E. Gilliam, Burlington; J. W. Girard, Jr., Asheville; E. T. Glenn, Boone; C. P. Godwin, Rocky Mount; C. C. Gooding, Havelock; Herbert W. Gooding, Ayden; C. J. Goodwin, Fayetteville; Robert Gordon, Chapel Hill; C. A. Graham, Sr., Ramseur; F. R. Graham, Charlotte; J. E. Graham, Jr., Charlotte; R. H. Graham, Lenoir; C. L. Grahl, Jr., Brevard; D. C. Griffin, Kernersville; W. K. Griffin, Durham; W. S. Griffin, Edenton; J. H. Guion, Charlotte; Jerry M. Gunter, Gastonia.

E. H. Hagerty, Belmont; G. F. Hale, Raleigh; A. L. Hamilton, Jr., Morehead City; W. L. Hand, Jr., New Bern; A. W. Hargrove, Raleigh;

Cynthia S. Harper, Chapel Hill; D. B. Harrell, Jr., Concord; J. A. Harrell, Elkin; R. B. Harrell, Elkin; H. C. Harrelson, Jr., Charlotte; F. G. Harris, Sanford; Guy V. Harris, Durham; T. H. Harris, Raleigh; W. I. Hart, Edenton; C. B. Hawkins, Raleigh; L. K. Heath, Durham; P. E. Hedrick, Lenoir; W. M. Heeden, Jr., Benson; Gary Heeseman, Charlotte; J. W. Heinz, Charlotte; C. R. Helsabeck, Rural Hall; W. J. Helsabeck, King; D. L. Henson, Kinston; J. L. Henson, Greensboro; R. E. Herman, Taylorsville; L. D. Herring, Raleigh; W. I. Herring, Clinton; E. M. Hester, High Point; J. N. Hester, Reidsville; L. B. Higley, Chapel Hill; J. N. Hill, Jr., Murphy.

D. R. Hinkle, Winston-Salem; J. Y. Hinson, Durham; T. R. Hinson, Burlington; O. R. Hodgins, Thomasville; M. J. Hoffman, Charlotte; R. R. Hoffman, Asheville; R. H. Holden, Shallotte; M. W. Holland, Chapel Hill; R. W. Holmes, Asheville; L. C. Holshouser, Rockwell; Garland C. Homes, Washington; J. S. Hood, Lexington; Brevitt Hook, Mebane; R. G. Hoover, Charlotte; E. B. Hopkins, Winston-Salem; D. B. Hord, Lawn-dale; D. F. Hord, Jr., Kings Mountain; George N. Horne, Bessemer City; J. B. Houser, III, Gastonia; B. H. Houston, Goldsboro; F. H. Howdy, Washington; A. E. Howell, Spencer; J. B. Howell, Greensboro; J. S. Howell, Little Switzerland; C. W. Hughes, Roxboro; J. H. Hughes, Roxboro; J. T. Hughes, Pittsboro; P. C. Hull, Jr., Charlotte; Charles A. Huneycutt, Albemarle; Hugh Hunsucker, Greensboro; R. F. Hunt, Jr., Rocky Mount; G. C. Hunter, Jr., Chapel Hill; M. R. Hunter, Greensboro; R. S. Hunter, Raleigh.

T. M. Hunter, Henderson; A. G. Inscoc, Spring Hope; Dwight A. Jackson, Winston-Salem; Wilbert Jackson, Clinton; Charles A. Jarrett, Charlotte; C. H. Jarrett, Jr., Charlotte; W. C. Jarvis, High Point; H. C. Jent, Winston-Salem; Jerry O. Jernigan, Dunn; A. H. Johnson, Greensboro; C. B. Johnson, Jacksonville; Charles B. Johnson, New Bern; J. M. Johnson, Laurinburg; K. L. Johnson, Raleigh; N. C. Johnson, Jr., High Point; W. Harrell Johnson, Southern Pines; Ben M. Johnston, Graham; C. M. Johnston, Charlotte; B. E. Jones, Jr., Concord; E. D. Jones, West Jefferson; M. T. Jones, Jr., Apex; P. E. Jones, Farmville; Rufus S. Jones, Warrenton; J. F. Jordan, Raeford; John J. Jordan, Charlotte; O. L. Joyner, Kernersville; Henry C. Jurney, Huntersville; B. Edmond Kanoy, Durham; H. A. Karesh, Greensboro; W. C. Keith, Clarkton.

W. E. Kelley, Raleigh; T. F. Kilkelly, Greensboro; J. M. Kilpatrick, Robersonville; David D. King, Jr., Lumberton; F. W. Kirk, Salisbury; W. S. Kirk, Salisbury; George F. Kirkland, Jr., Durham; J. Donald Kiser, Charlotte; W. J. Kiser, High Point; C. D. Kistler, Randleman; Robert F. Kluttz, Landis; Kermit Knudtson, Chapel Hill; A. A. Lackey, Fallston; L. E. Lamb, Jr., Rural Hall; Nelson D. Large, Salisbury; J. T. Lasley, Greensboro; J. J. Lauten, Greensboro; G. A. Lazenby, Jr., Durham; T. E. Leary, Ahoskie; Charles B. Ledbetter, Raleigh; James H. Lee, Mount Olive; Lewis W. Lee, Wilson; W. G. Lee, Smithfield; J. A. Leggette, Jr., Durham; B. P. Lentz, Charlotte; R. B. Lessem, Fayetteville; H. H. Levine, Winston-Salem; James B. Lewis, Gastonia; J. H. Ligon, Jr., Raleigh; M. M. Lilley, Scotland Neck.

R. L. Lindahl, Chapel Hill; H. O. Lineberger, Jr., Raleigh; W. S. Linville, Jr., Wilson; J. E. Little, Statesville; A. T. Lockwood, Asheville; Bobby A. Lomax, Salisbury; Herbert S. Long, Graham; John S. Long, Winston-Salem; Robert Long, Statesville; Robert E. Long, Roxboro; T. W. Lowry, Gastonia; C. R. Lupton, Chapel Hill; J. M. McAllister, Raleigh; C. W. McAnally, Madison; G. F. McBrayer, Morganton; D. W. McCaffity, Raleigh; Clyde N. McCall, Stanley; C. W. McCall, Tryon; R. S. McCall, Marion; F. W. McCracken, III, Sanford; W. J. McDaniel, Rutherfordton; W. T. McFall, Asheville; W. T. McFall, Jr., Chapel Hill; Gates McKaughan, Lumberton; O. R. McKenzie, Burlington; W. L. McRae, Red Springs; J. H. Maddox, Enka; Sandy C. Marks, Chapel Hill; W. P. Marshall, Raleigh; J. A. Marshburn, Butner.

Ernest L. Martin, Statesville; F. E. Martin, Asheville; W. T. Martin, Raleigh; Carl B. Massey, Waxhaw; L. M. Massey, Zebulon; Milton V. Massey, Waynesville; S. H. Massey, Jr., Warrenton; Zyba K. Massey, Zebulon; Guy M. Masten, Winston-Salem; R. E. Masten, Winston-Salem; D. B. Masters, Raleigh; W. B. Masters, Bakersville; W. M. Matheson, Boone; R. G. Mauney, Forest City; Erika K. Mazitis, Morganton; K. H. Meadows, Winston-Salem; Van B. Meadows, Winston-Salem; Phil M. Medford, Waynesville; E. M. Medlin, Aberdeen; L. P. Megginson, Jr., High Point; R. P. Melvin, Winston-Salem; F. C. Mendenhall, Winston-Salem; J. A. Menius, Raleigh; J. W. Menius, Asheboro; B. G. Miller, Charlotte; Fred C. Miller, Jonesville; Roy A. Miller, Jr., New Bern; W. J. Miller, Lenoir; J. B. Milliken, Siler City; C. E. Minges, Rocky Mount; C. R. Minges, Rocky Mount; M. G. Miska, Pittsboro; D. L. Mitchell, Chapel Hill.

John T. Mize, Tryon; H. L. Monk, Jr., Durham; Hewitt E. Moon, Kannapolis; H. W. Moore, Hillsboro; J. S. Moore, Reidsville; L. J. Moore, St. Pauls; L. J. Moore, Jr., Lumberton; S. W. Moore, Burlington; W. H. Moore, Reidsville; Paul Moorefield, Mount Airy; Donald W. Morris, Charlotte; Ernest Morris, Charlotte; T. A. Morris, Asheville; R. R. Morrison, Jr., Raleigh; V. M. Morrison, Raleigh; K. B. Moser, Winston-Salem; S. E. Moser, Gastonia; John E. Moses, Charlotte; Joseph M. Moses, Belmont; Elliot R. Motley, Charlotte; W. E. Murphy, Jr., Roanoke Rapids; H. V. Murray, Burlington; H. V. Murray, Jr., Burlington; W. F. Mustian, Manteo; A. W. Nance, Point Harbor; J. S. D. Nelson, Raleigh; R. M. Nelson, Chapel Hill; T. E. Nelson, Jr., Raleigh; J. B. Newman, Burlington; M. E. Newton, Chapel Hill; M. P. Nicholson, Jr., Raleigh.

T. G. Nisbet, Charlotte; Perry M. Noblitt, Shelby; W. S. O'Berry, Tarawa Terrace; Fred N. Ogden, II, Waynesville; T. R. Oldenburg, Chapel Hill; C. S. Olive, Fayetteville; R. M. Olive, Sr., Fayetteville; C. P. Osborne, Jr., Lumberton; Olin W. Owen, Charlotte; R. B. Outland, Jr., Rich Square; G. L. Overman, Goldsboro; K. D. Owen, Charlotte; L. G. Page, Yanceyville; C. A. Parker, Marion; W. H. Parker, Valdese; Elwood M. Parkerson, Burlington; Eldon H. Parks, Elkin; L. H. Paschal, Fayetteville; R. M. Patterson, Concord; Ruta B. Paulson, Raleigh; J. A. Pearce, Raleigh; O. R. Pearce, Jr., Greenville; W. M.

Pearce, Hamlet; E. A. Pearson, Jr., Raleigh; Paul L. Pearson, Apex; Robert B. Peck, Roanoke Rapids; W. Stewart Peery, Charlotte; Fred N. Pegg, Kernersville; W. T. Pennell, Asheville; James F. Peppers, Marion; H. L. Perdue, Burlington; T. Edwin Perry, Raleigh; R. E. Petree, Charlotte; John R. Pharr, Charlotte.

Harold E. Plaster, Shelby; Hubert Plaster, Shelby; Marvin Pleasants, Louisburg; C. A. Pless, Jr., Asheville; C. C. Poindexter, Greensboro; C. W. Poindexter, Greensboro; A. L. Poovey, Hickory; O. L. Presnell, Asheville; W. A. Pressly, Greensboro; Bill Prevost, Jr., Hazelwood; A. D. Price, Chapel Hill; J. L. Price, Jr., Hickory; W. H. Price, Monroe; E. N. Pridgen, Fayetteville; J. E. Pruett, Bessemer City; L. D. Pruett, Elkin; P. C. Purvis, Fairmont; W. G. Quarles, Chapel Hill; Joseph F. Quigg, Fayetteville; Marion L. Ralls, Greensboro; W. T. Ralph, Belhaven; Frank M. Ramos, Butner; W. W. Rankin, Raleigh; W. E. Raspberry, Grifton; J. L. Raymer, Shelby; J. F. Reece, Lenoir; J. P. Reece, Concord; Gene L. Reese, Boone; H. P. Reeves, Jr., Charlotte; Jerome G. Rehm, Charlotte; E. H. Reich, Winston-Salem; T. B. Reid, Jr., Jacksonville; R. R. Renfrow, Fayetteville.

H. S. Rhyne, Gastonia; M. B. Richardson, Albemarle; R. E. Richardson, Chapel Hill; W. F. Riddle, Winston-Salem; C. E. Ridenhour, Kannapolis; C. E. Roberts, Dunn; J. E. Roberts, Burlington; Pearce Roberts, Jr., Asheville; James F. Rodgers, Statesville; Jere E. Roe, Raleigh; John T. Rogers, Charlotte; Junius H. Rose, Jr., Kinston; Grady Ross, Charlotte; Norman F. Ross, Durham; Thurman J. Ross, Durham; O. D. Rowe, Marion; C. B. Sabiston, Jr., Smithfield; R. H. Sager, Chapel Hill; Cleon W. Sanders, Benson; B. B. Sapp, Jr., Durham; W. L. Saunders, Greensboro; R. F. Scherer, Winston-Salem; E. C. Schiebel, Elkin; W. G. Schneider, Chapel Hill; F. J. Schnell, High Point; Ludwig G. Scott, Burlington; W. A. Secrest, Winston-Salem; D. W. Seifert, Jr., Raleigh; D. B. Seitter, Wilmington; Fred L. Self, Lincolnton.

Isaac R. Self, Lincolnton; S. W. Shaffer, Greensboro; R. J. Shankle, Chapel Hill; F. C. Shaw, Lenoir; Neal Sheffield, Greensboro; Neal Sheffield, Jr., Greensboro; C. F. Sherman, Granite Quarry; James W. Sigmon, Greensboro; T. Edgar Sikes, Jr., Greensboro; J. E. Silvers, Greenville; W. H. Simendinger, Jr., Charlotte; F. C. Slaughter, Kannapolis; W. M. Sloop, Crossnore; Troy B. Sluder, Jr., Chapel Hill; Amos H. Smith, Lexington; A. L. Smith, Jr., Raleigh; E. L. Smith, Raleigh; Fred J. Smith, Morganton; G. W. Smith, Kinston; James H. Smith, Wilmington; John W. Smith, Jr., Pinehurst; Junius C. Smith, Wilmington; Marcus R. Smith, Raeford; Ray H. Smith, Cherryville; T. A. Smith, Winston-Salem; C. L. Sockwell, Chapel Hill; M. R. Solomon, Greensboro; W. A. Sowers, Lexington; John B. Sowter, Chapel Hill; Herbert Spear, Kinston; J. H. Spillman, Winston-Salem; Riley E. Spoon, Jr., Winston-Salem.

J. Fred Sproul, Raleigh; Max L. Spurlin, Hazelwood; A. R. Stanford, Greensboro; L. B. Stanley, Raleigh; S. H. Steelman, Lincolnton; George W. Stephenson, Red Springs; C. W. Stevens, Raleigh; A. L. Stoddard, Havelock; F. H. Stone, Charlotte; I. F. Stone, Pilot Mountain; F. M.

Stonestreet, Albemarle; W. D. Strickland, Chapel Hill; P. A. Stroup, Jr., Charlotte; James G. Strupe, Winston-Salem; C. M. Sturdevant, Chapel Hill; R. E. Sturdevant, Chapel Hill; C. H. Sugg, Draper; R. W. Sugg, Durham; J. R. Suggs, Asheboro; Hugh E. Sutphin, Durham; J. E. Swindell, Raleigh; C. F. Taylor, Charlotte; Kenneth Taylor, Jr., Gastonia; P. R. Taylor, Belmont; R. G. Taylor, Jr.; North Wilkesboro; W. C. Taylor, Salisbury; C. H. Teague, Greensboro; E. R. Teague, Reidsville; J. J. Tew, Clayton; H. W. Thompson, China Grove.

H. K. Thompson, Wilmington; S. W. Thompson, III, Raleigh; J. O. Thorpe, Charlotte; M. S. Thurston, Salisbury; F. N. Tomlinson, Winston-Salem; R. L. Tomlinson, Wilson; S. B. Towler, Raleigh; G. L. Townsend, Dunn; L. P. Trivette, Mooresville; W. W. Tucker, Goldsboro; W. J. Turbyfill, Asheville; R. H. Turlington, Clinton; R. S. Turner, Greensboro; H. W. Twisdale, Charlotte; F. H. Underwood, Carthage; Jack B. Upchurch, Apex; Thomas W. Vinson, Jr., Durham; C. H. Wadsworth, Concord; F. H. Walker, Yadkinville; M. E. Walker, Durham; W. W. Walker, Gastonia; Lester E. Wall, Charlotte; Mitchell W. Wallace, Spring Lake; E. Ben Ward, Whiteville; James A. Ward, Roanoke Rapids; W. G. Ware, Jr., Winston-Salem; R. B. Warlick, Southern Pines; Ray A. Warren, Lincolnton; R. H. Watson, Charlotte; G. E. Waynick, Jr., Winston-Salem; T. F. Weant, Salisbury.

B. H. Webster, Charlotte; F. T. Webster, Madison; Thomas C. Webster, Yanceyville; DeLeon Wells, Jr., Wallace; R. G. Wharton, Salisbury; J. R. Wheless, Reidsville; C. M. Whisnant, Burnsville; R. D. White, Rocky Mount; T. L. White, North Wilkesboro; A. P. Whitehead, Rocky Mount; J. W. Whitehead, Smithfield; R. C. Whitehurst, Jr., Wilson; R. L. Whitehurst, Rocky Mount; P. B. Whittington, Jr., Greensboro; W. J. Wiggs, Fayetteville; R. M. Wilkinson, Winston-Salem; C. T. Williams, North Wilkesboro; E. P. Williams, Charlotte; Jabez Williams, Jr., Thomasville; Joel S. Williams, Statesville; R. E. Williams, Goldsboro; J. F. Williamson, Wadesboro; Guy R. Willis, Durham; G. Curtis Wilson, Wilson; Noah R. Wilson, Jr., Pittsboro; P. W. Winchester, Morganton; Heber W. Winley, Jr., Washington; C. V. Winter, Charlotte; M. T. Wood, Chapel Hill; D. C. Wocdall, Erwin; F. S. Woody, Roxboro.

L. W. Woody, Spruce Pine; L. W. Woody, Jr., Spruce Pine; M. E. Woody, Jr., Gastonia; Edward K. Wright, Jr., Williamston; P. P. Yates, Lenoir; Robert A. Yates, Chadbourn; W. D. Yelton, Hickory; W. F. Yelton, Winston-Salem; G. W. Yokeley, Winston-Salem; K. M. Yokeley, Winston-Salem; Charles P. Youmans, Durham; D. C. Young, Jr., Salisbury; W. H. Young, Burgaw; H. S. Zaytoun, Raleigh; J. M. Zealy, Goldsboro; James N. Ziglar, Jr., Chapel Hill; H. S. Zimmerman, Winston-Salem; J. W. Zimmerman, Jr., Salisbury; L. R. Zimmerman, High Point; T. R. Zimmerman, High Point.

THE DISTRICT MEETINGS—1963

BY THE DISTRICT EDITORS

"A Perfect Blend . . ."

A PERFECT BLEND of the social and the scientific describes the First District Dental Society meeting held at the Grove Park Inn in Asheville, September 28-30. Saturday night the members and their wives were able to join in a big circle going left. They danced, whooped and hollered to one of the finest square dance bands in the state. A team of young boys and girls from Hendersonville demonstrated that clogging is easy if you start young.

A beautiful autumn day greeted the golf enthusiasts who blazed away Sunday morning at the Asheville Country Club. Those receiving awards were: Dr. A. C. Riddle, low net; Dr. W. L. Woody, low gross; Dr. Joe Crowell, second low gross and Dr. Ken Rogers, third low gross.

A social hour Sunday afternoon allowed a time for an informal introduction of State Officers and new applicants for membership.

Following a buffet dinner the business session was called to order by Dr. Fenton Cunningham. Dr. David Becker, Chairman of the Necrology Committee, informed the Society of the death of Dr. Charles S. McCall of Forest City.

The following were elected to membership in the First District So-

ciety: Dr. Jack Guy Braswell, Spruce Pine; Dr. Bill Dennis, Asheville; Dr. Carrol L. Grahl, Jr., Brevard; Dr. Raymond A. McKee, Cherryville; Dr. Richard E. Murphy, Shelby; Dr. Dean R. Peake, Spruce Pine; Dr. William S. Prevost, Jr., Waynesville; Dr. William G. Quarles, Gastonia; Dr. David H. Simpson, Gastonia; Dr. Robert B. Suggs, Belmont.

Dr. Walter Clark in his charge to the new members urged that they: (1) Plan their work and work their plan; (2) relieve pain at all times; (3) aid organized dentistry; (4) be a good citizen; (5) join service or civic clubs; (6) unite with the church of their faith.

Following a motion by Dr. Ralph Coffey, the district unanimously endorsed the candidacy of Dr. Pearce Roberts for the presidency of the North Carolina Dental Society.

The decision was made to return to the Grove Park Inn in 1964.

The slate of officers for 1964 which was elected was: Dr. Bradley Taylor, Hendersonville, President Elect; Dr. M. M. Forbes, Le-noir, President; Dr. A. C. Riddle, Asheville, Vice President; Dr. Frank Buchanan, Hendersonville, Executive Committee; Dr. John Girard, Asheville, Secretary-Treasurer; and

Drs. Max Carpenter, Asheville, and Arthur Breland, Murphy were named to the House of Delegates.

"Photophobia or sensitivity to light and a pinkish grey tongue are symptoms of protein deficiency."

"A burning tongue can be a result of: (1) Anemia; (2) hormonal disturbance; (3) emotional imbalance; (4) a combination of all three."

"A chief complaint of everything tasting sour can be a vitamin deficiency."

"In administering Vitamin B, always make sure the patient takes Vitamin B before the meal with water then followed by protein as part of the meal. Improper absorption and metabolism will occur if not done in this manner."

These quotes were taken from the lecture by Dr. Arthur Elfenbaum of Chicago to the First District Dental Society. Dr. Elfenbaum is now Professor Emeritus of both the University of Illinois and North Western University and is active as a Senior Attending Member of the Medical Staff at Michael Reese Hospital and Medical Center.

CECIL A. PLESS, JR., D.D.S.
Editor
 First District



Top: First District Officers are installed by President Fenton S. Cunningham. From left to right: M. M. Forbes, President; J. W. Girard, Jr., Secretary-Treasurer; A. B. Breland, Delegate; F. A. Buchanan, Executive Committee Member; C. B. Taylor, President-Elect; and Max W. Carpenter, Delegate.

Middle: R. D. Coffey (center) presents the usual gift celebrating the birth of a grandson, Ralph Don, III, to N.C.D.S. President S. Byron Towler (left) and First District President Fenton S. Cunningham.

Bottom: Pearce Roberts, Jr., had an interested audience for his table clinic.

Projected Clinics Attract Many

THE FORTY-THIRD ANNUAL SESSION of the Second District Dental Society was held at the Queen Charlotte Hotel at Charlotte, September 22-23, 1963.

The meeting opened Sunday evening at 6:00 p.m. with a banquet for members, guests, and wives. Dr. James E. Graham, Jr., President, presided. Dr. Joseph F. Volker from the University of Alabama was the guest speaker.

Dr. James P. Bingham, Vice President, presented the following new members: Drs. Glen E. Blackwell, Guy E. Haddix, George N. Horne, Bruce A. Ketner, Donald L. Marbury, Kenneth D. Owen, Mark N. Perlin, W. Joseph Porter, Hubert B. Sapp, W. H. Simendinger, and James N. Ziglar, Jr. Dr. Barry G. Miller delivered the welcome and charge to the new members.

At the Necrology Service, the following deceased members were honored: Drs. Samuel A. Taylor, Stuart A. Barksdale, William C. Current, Maurice O. Fox, Wallace

Holcomb, Floyd Johnson, and Carlyle D. Wheeler.

The Projected Clinics attracted a large attendance. Drs. Victor L. Andrews, Frank H. Daniel, Nelson D. Large, Richard F. Scherer, Thomas G. Nisbet, Z. Vance Kendrick, each gave a fifteen minute projected clinic.

The Second District was fortunate in having two outstanding major clinicians:

Dr. Joseph F. Volker, A.B., M.S., D.D.S., Ph.D., Dean of the University of Alabama Dental School. Dr. Volker spoke to the society on "Biological Operative Dentistry." Dr. Volker was also the after dinner speaker for the banquet on Sunday evening.

Dr. Jens J. Pindborg, D.D.S., Dr. Odont., from Copenhagen, Denmark was the second clinician. Dr. Pindborg is Professor and Chairman of the Department of Oral Pathology, Royal Dental College, Copenhagen, Denmark. Dr. Pindborg, a very capable speaker of the Eng-



Above: Second District Officers: (l. to r.) James P. Bingham, Jr., Delegate; J. H. Spillman, Vice President; Robert A. George, President; Horace P. Reeves, Jr., Secretary-Treasurer; Fleming H. Stone, Executive Committee Member; and Paul A. Stroup, Jr., Delegate.

Top right: N.C.D.S. President S. Byron Towler addressed the Second District.

Bottom right: President J. E. Graham, Jr. (r.) gives Secretary-Treasurer Horace P. Reeves, Jr., an assist.



lish language, spoke to the society on "The Examination and Evaluation of Oral Mucosa," aided by a fine collection of color slides.

The following new officers were installed: Drs. Robert A. George, President; J. B. Freedland, President-Elect; J. Harry Spillman, Vice President; Horace P. Reeves, Secretary-Treasurer; Fleming H. Stone and C. Robt. Helsabeck, Executive Committee; Wm. G. Ware, Jr., Editor; Paul A. Stroup and James P. Bingham, Jr., Delegates to the State Convention.

FLEMING H. STONE, D.D.S.
Editor
Second District



Dr. Eastman Featured



THE THIRD DISTRICT meeting at Mid-Pines October 6-7 featured Dr. Robert Eastman, Professor of Operative Dentistry at Loyola who presented a program on the proper handling of silver amalgam alloy.

The regular session began with a well-attended social hour followed by the traditional banquet and some delightful music by Faye and Tony McKenzie.

President Clay Poindexter presided and introduced Dr. C. Robert VanderVoort who charged the new candidates for membership. "Be grateful for a public's respect and admiration you yourself as yet have had no major opportunity to earn," he said. The members then adjourned to the meeting hall for the business session.

In addressing the business session, President Poindexter stated: "There



Top: Baxter B. Sopp, Jr., (second from right), newly elected President of the Third District, accepts the gavel from retiring President C. W. Poindexter as other officers look on (l. to r.): J. S. Dilday, Chairman, Executive Committee; Charles W. Horton, Secretary-Treasurer; and T. E. Sikes, Jr., President-Elect.

Middle: Three members talk it over during a break in the Third District meeting.

Bottom: A fine array of table clinics were presented at the Third District and here is one by Drs. Benjamin R. Baker and T. R. Oldenburg on "Vital and Non-vital Pulpotomy Techniques."

is emerging a new demand for comprehensive dental care. The success with which we meet these newly recognized but unmet needs may well determine the survival of the profession as we know it." He also called for a re-evaluation of the educational program in order to train the number of auxiliary personnel in the minimum practical time to meet the needs of the dental office. He stressed the need to increase office productivity and efficiency by employing trained auxiliary personnel and listed some important guidelines necessary to such a program. "We must boldly face these new concepts. We shall then go forward toward meeting the forces that challenge our profession as we know it today," he concluded.

Dr. John Brauer gave a report on the progress of the future expansion facilities at the Dental School, outlining a time-table for its completion in approximately 8 to 10 years. He announced the appointment of Dr. James Bawden as Assistant Dean and Director of Research at the School.

Dr. Roy Lindahl defined and explained the operation of the Dental Service Corporation. He emphasized the important role of leadership organized dentistry has in the organization and management of such a service corporation.

The following were elected to membership in the Third District Society: Drs. George D. Anderson, Southern Pines; Wilbur B. Bland, Troy; John K. Campbell, High Point; Cynthia S. Harper, Chapel Hill; John W. Mainwaring, Jr., Chapel Hill; Floy T. Oldham, Jr., Chapel Hill; Eldon H. Parks, Jamestown; Robert E. Thomas, Rosemont; Julian S. Trail, Nor-

wood; Robert L. Turner, Greensboro; Donald F. Warren, Chapel Hill; William Robert Wentz, Durham; Charles P. Youmans, Durham.

Monday morning table clinics were presented by Drs. T. R. Oldenberg, Benjamin R. Baker, M. P. Wood, John B. Sowter, Ludwig G. Scott, James B. Howell, Clyde L. Taylor, Marion L. Ralls, William M. Ditto, William L. Hattiwanger, and Charles W. Horton.

The thirty-six golfers who had been playing under the sunny skies and in the mild climate of Mid-Pines for the customary golf match ended their play with Dr. Ted Oldenberg walking away with top honors with a low gross of 74. Dr. Doug Strickland and Dr. Roy Heath tied for low net scores.

At the conclusion of the scientific session Dr. Clay Poindexter called a short business session and installed the new officers: Dr. Baxter B. Sapp, President; Dr. T. E. Sikes, Jr., President-Elect; Dr. Harrell Johnson, Vice President; Dr. C. W. Horton, Secretary-Treasurer; and Dr. John Dilday, Delegate to the N. C. Dental Society. Dr. Neal Sheffield, Jr. was appointed Third District Editor.

A resolution was passed reaffirming the Society's support of a previous resolution of the State Society, in which public schools were urged not to dispense (sell) certain sweets in the schools.

Dr. Baxter Sapp announced that the Third District Meeting next year would be held October 11, 12, 13 at the newly improved Jack Tar Motel in Durham.

NEAL SHEFFIELD, JR., D.D.S.
Editor
Third District

Assistant Surgeon General at Fourth

MAJOR GENERAL JOSEPH L. BERNIER, Chief of Staff for the Army Dental Corps, and Assistant Surgeon General of the United States, was the featured clinician for the Fourth District Dental Society at its annual meeting in Raleigh September 9-10, 1963. Dr. Robert T. Byrd, president, introduced guests at the banquet Monday night.

On Tuesday morning General Bernier's illustrated lecture on oral cancer lesions followed the opening session. General Bernier stressed the role of the general practitioner in the detection and treatment of lesions in the mouth leading to cancer.

Dr. Byrd, in his presidential address emphasized our responsibility in overcoming public apathy regarding the necessity of maintaining good dental health. We should, he

stated, also try to interest good students in dentistry as a career.

Dr. W. Penn Marshall was responsible for a fine array of table clinics in the afternoon presented by: Drs. Roy L. Earp, F. D. Bell, Arthur Davis, Thomas G. Collins, Thomas H. Fetzer, Richard S. Hunter and James A. Crawford, all of Raleigh; R. M. Ransom, Knightdale; Gordon L. Townsend, Dunn; and Colin P. Osborne, Lumberton.

Dr. W. W. Rankin gave the necrology report for the district and we were very happy not to have lost any members of the Fourth District.

Dr. Joseph M. Johnson gave an excellent charge to the new members — William J. Lee of Raleigh, Glenn R. Nantz of Lumberton, Frank M. Ramos of Butner, Robert B. Taylor of Fayetteville, and William R. Spencer of Raleigh who transferred from the Second District.

Top: Dr. L. D. Herring (second from right) was installed as President of the Fourth District. Other officers (l. to r.) are: R. T. Byrd, retiring President; L. A. Cameron, Vice President; William H. Oliver, Secretary-Treasurer; and J. Henry Ligon, Jr., President-Elect.

Middle: (l. to r.) UNC Dean John C. Brauer, G. Fred Hale, past president of the State and Fourth District Societies, and Fourth District President R. T. Byrd.

Bottom: Roy L. Earp presented a table clinic on "Endodontics."



The new officers for 1964 are: Drs. L. D. Herring, President; J. Henry Ligon, President-Elect Lawrence A. Cameron, Vice President; William H. Oliver, Secretary-Treasurer; and Paul Fitzgerald, Editor.

The Auxiliary, under the leadership of Mrs. J. M. McAllister met in the Velvet Cloak Inn with Mrs. Fred Sproul as Secretary. A fashion show by Dunn's of the Cameron Village was held prior to the luncheon. Mrs. J. Henry Ligon was elevated to presidency for the ensuing year. The other officers are: Mrs. Thomas Fetzer, Vice President; Mrs. Roy Gaines, Secretary; and Mrs. Darwin McCaffity, Treasurer.

PAUL FITZGERALD, D.D.S.
Editor
Fourth District





"Periodontia-Split Flap and Gingival Procedures" was the subject of this table clinic by Dr. M. W. Aldridge.

Jacksonville Dentists — Host to Fifth

THE FIFTH DISTRICT Dental Society met in Jacksonville, N. C. September 8-9 at the new spacious Hornes Motor Lodge. The local arrangements committee headed by Dr. Hogan Gaskins did a wonderful job of providing facilities and expediting the entire meeting.

Sunday afternoon was devoted to registration, golfing, boating and fishing. Following the fellowship hour Dr. Gaskins presided as master of ceremonies at the banquet which was highlighted by entertainment by Bob Fontaine, son of Frank (Crazy) Fontaine of the Jackie Gleason show. Mr. Fontaine did a series of impersonations including the most famous one of his dad.

At the general session following

the banquet President Bob Gilbert presided. In his address, Dr. Gilbert emphasized the need for more post-graduate seminars. He hoped there would be more participation in these seminars.

New members received by the district included: Drs. Garland Homes, Washington; Carter T. Bennett, Greenville; Jay M. Collie, Greenville; Thomas Vinson, Jr., Murfreesboro; and Myron Ennis, Goldsboro.

Members received as transfers from other districts were: Drs. William R. Jones, Jacksonville, from the Fourth District; and Rothschild H. Holden, Shallotte, from the Third District.

Dr. Charles Lancaster of Windsor

Fifth District Officers 1963-64. Standing: W. L. Hand, Jr., President; C. P. Godwin, President-Elect. Seated: James H. Lee, Secretary-Treasurer; L. R. Turner, Vice President.



was re-instated to membership.

New officers elected Sunday night were: Drs. William L. Hand, Jr., President; Charles P. Godwin, President-Elect; L. R. Turner, Vice President; James H. Lee, Secretary-Treasurer. Dr. William B. Gilbert Jr., was appointed Editor to succeed Dr. J. H. Rose, Jr.

The delegates to the House of Delegates of the North Carolina Dental Society are: Drs. W. T. Ralph, M. W. Aldridge, R. H. Gilbert, Charles T. Barker and G. Curtis Wilson.

Named to the Executive Committee were: Drs. Smith Jewel and Richard F. Hunt, Jr.

Monday morning was devoted to the main clinician for the meeting, Maj. Gen. Joseph Bernier, Asst. Surg. General and Chief of Army Dental Corps. General Bernier gave an interesting presentation of new concepts of prevention in all phases of dentistry.

Following a steak luncheon, the following table clinics were presented: "Oral Pap Smears for Cancer Detection," Drs. F. D. Bell and Arthur Davis of Raleigh; "Periodontia — Split Flap & Gingival Extension Procedures," Dr. Henry Aldridge, Greenville; "A Root Canal Treatment Procedure," Drs. Ray Carnevale and Thomas Boykin, Goldsboro; "Crown and Bridge," Dr. Buck Wells, Wallace, N. C.

At the final business session Monday afternoon a resolution was passed requesting the State Board of Education to again reconsider banning the sale of soft drinks and snacks on school premises.

New Bern was selected for the 1964 meeting site. Installation of new officers and drawing of prizes ended the session.

JUNIUS H. ROSE, JR., D.D.S.
Editor
 Fifth District

General News



Dr. Miller.....new Editor



Dr. Dorton.....Assistant Editor

Dr. Diercks Resigns

Dr. C. C. Diercks, Editor-Publisher of the JOURNAL since 1959, submitted his resignation to the Executive Committee October 6, 1963, for personal reasons.

Dr. T. G. Collins, Chairman of the Executive Committee announced that Dr. Diercks's resignation was accepted with regret. He noted that the Morganton dentist had served faithfully and energetically as Editor-Publisher and that his contributions to the JOURNAL had been manifold.

Subsequently, Dr. Collins announced that Dr. Barry G. Miller of Charlotte, had been appointed by

the Executive Committee to succeed Dr. Diercks as Editor-Publisher, effective January 1, 1964, and that Dr. M. L. Dorton of Statesville had been named Assistant Editor.

Judge's Decision Expected in Spring

The complaint of Dr. R. A. Hawkins against the North Carolina Dental Society and the Second District Dental Society was heard before Judge Wilson Warlick in the Federal District Court in Charlotte, September 9 and 10. Dr. Hawkins, a Charlotte dentist and integration leader, alleged in March 1960 that

he had been denied membership in the Society, its component, and the American Dental Association because of race, in violation of the 14th Amendment.

After two days of testimony, Judge Warlick stated he would render a decision only after the record had been transcribed by the official court reporter and he had an opportunity to study it.

Because of a backlog of work for the reporter the transcript is not expected to be available until sometime in January 1964.

The Judge requested that counsel for each side, within 30 days after receiving a copy of the transcript, forward to him requests for findings of fact and conclusions of law. Therefore, it appears that a decision cannot be expected before the Spring of 1964.

Evidence presented by the Society's attorneys showed that from the beginning of its existence in 1856, the bylaws of the Society had never contained any provisions to bar membership on the basis of race.

The attorneys pointed out that the North Carolina Dental Society is a voluntary association of dentists licensed to practice in North Carolina who desire to join and who are accepted for membership in accordance with constitutions and bylaws which have been in force for many years. Evidence was presented to prove that the Society exercises no governmental function, state or federal, and that membership in it is not required as a prerequisite for the securing of a license to practice dentistry or for the practice of dentistry.

Further, the attorneys held that no dentist is required to become a member nor is the Society required

to admit any dentist; and that neither the Society nor any individual dentist has any legal obligation with respect to admission of members, signing or endorsing applications for membership, or giving any reason whatever for its or his action either affirmative or negative.

Finally, the attorneys said, there is nothing in the constitution or the laws of the United States or of the State of North Carolina which authorizes, requires, or justifies the court to compel the admission of any individual dentist into membership in the Society.

Plans Revealed for 108th Session

Dr. R. A. McEwen of Atlanta, Dr. R. E. Boudreaux of New Orleans, and Colonel Frank C. Jerbi of Walter Reed Hospital will be featured clinicians at the 108th Annual Session of the Society in Pinehurst, May 10-13, 1964.

Guest speaker at the opening meeting on Sunday night, May 10, will be Dr. James P. Hollers of San Antonio, Texas, President of the American Dental Association.

The convention's headquarters will be The Carolina which has recently undergone extensive renovation, including the installation of air conditioning in all public areas — the lobby, dining hall, glassed-in porch areas and the ball room.

Dr. L. D. Herring of Raleigh, General Chairman, has announced that final plans for the meeting will be completed on January 12, when the Annual Session Committee meets in Pinehurst. A preliminary program will be included in the February

Newsletter and a full program will be carried in the April JOURNAL.

Application forms for hotel reservations for the meeting will be sent to the membership on February 8.

Dr. W. Penn Marshall, Chairman of the Exhibits Committee, has announced that commercial exhibit space for the 1964 meeting has been sold out since early in December. Sixty-seven companies will exhibit, the largest number in history.

An array of selected scientific exhibits from local and national health agencies will be on display, according to Dr. Gerald Cathey, Scientific Exhibits Chairman.

A golf tournament and skeet shoot will be held on Sunday, and arrangements are being made for fishing, bowling, tennis and horseback riding during the entire three and a half days. Dr. R. Bruce Warlick is in charge of all recreational events. Dr. B. B. Sapp, Jr., is in charge of the banquet and dance on Tuesday night and Dr. Richard F. Hunt, Jr., will handle the entertainment of guests and the informal reception on Monday afternoon.

Projected clinics are scheduled for Sunday afternoon under the direction of Dr. Fred N. Ogden, II and the table clinics will be on display Wednesday morning, with Dr. James A. Harrell in charge.

Dr. McEwen will lecture on operative dentistry Monday morning and Tuesday afternoon.

Dr. Boudreaux will speak on oral surgery on Monday morning and Tuesday morning.

Colonel Jerbi's topic on Monday afternoon and Tuesday morning will be immediate dentures.

D.O.C. Elects Lee

Dr. James H. Lee of Mount Olive, was named president of the District Officers' Conference at its 11th annual meeting in Pinehurst, December 7 and 8. He succeeds Dr. M. M. Forbes of Lenoir who presided over the two-day event at The Carolina.

The conference featured papers by Dr. W. L. Hand, Jr., of New Bern on dental student recruitment and Dr. S. H. Isenhower of Newton on the dental service corporation, and included a review of actions of the 1963 House of Delegates of the American Dental Association by Dr. Ralph D. Coffey of Morganton.

Special sessions for training district officers in their duties and responsibilities were conducted by: Dr. C. W. Poindexter of Greensboro, Presidents and Presidents-Elect; Dr. Darden J. Eure of Morehead City, Vice Presidents; Executive Secretary A. M. Cunningham and central office secretary Mira Riddle, Secretary-Treasurers; and Dr. C. C. Diercks of Morganton, Editors.

Conference officers elected and installed in addition to Dr. Lee included: Dr. J. H. Spillman of Winston-Salem, Vice President; and Dr. J. Henry Ligon, Jr., of Raleigh, Secretary.

At the close of the conference the dates and sites of the district meetings for 1964 and 1965 were announced as follows:

First District: October 3-5, 1964, Grove Park Inn, Asheville; October 2-4, 1965, Grove Park Inn, Asheville.

Second District: September 20-21, 1964, Hotel Robert E. Lee, Winston-Salem; September 19-20, 1965, Charlotte.

Third District: October 10-12, 1964, Jack Tar Motel, Durham; September 25-27 or October 23-25, 1965, Jack Tar Motel, Durham.

Fourth District: September 28-29, 1964, Sir Walter Hotel, Raleigh; October 11-12, 1965, Sir Walter Hotel, Raleigh.

Fifth District: September 27-28, 1964, Governor Tryon Hotel, New Bern; October 10-11, 1965, Biltmore Hotel, Morehead City.

Fifty-three district officers, their wives, and guests registered for the conference. Special guests included district delegates to the North Carolina Dental Society.

Dr. Freedland on Hinman Program

"More in '64" will be the theme of the 52nd annual Thomas P. Hinman Dental Meeting, one of the dental profession's largest annual meetings which is scheduled in Atlanta's Municipal Auditorium, March 22-25.

Featured on the program will be:

Lt. Col. S. N. Bhaskar, Washington, D. C., head of the Department of Oral Pathology at the United States Army Institute of Dental Research, "Diagnosis and Treatment of White Lesions of the Oral Mucosa."

Dr. Peter E. Dawson, St. Petersburg, Florida, widely-acclaimed in conservative reconstruction, "The Concept of Complete Dentistry."

Dr. J. B. Freedland, Charlotte, North Carolina, expert in endodontics, "Endodontics for the Practical Dentist."

Roy Garn, New York City, author of "The Magic Power of Emotional Appeal," and widely-known lecturer and consultant, "The Importance of Emotional Appeal in Doctor-Patient Relations."

Dr. James E. House, Indianapolis, Indiana, Department of Prosthodontics at the University of Indiana, "How to Win Patients and Influence Tissues."

Dr. Rex Ingraham, Los Angeles, California, widely-known in operative dentistry, "A New Concept in the Amalgamation and Manipulation of Dental Alloy."

Dr. Max Sadove, Chicago, Illinois, instructor in anesthesiology at the University of Illinois, "Reactions to Local Anesthetic Agents."

Dr. Roy M. Wolff, Clayton, Missouri, internationally - recognized in pedodontics, "Patient Education by Audio-Visual Methods."

The four special clinics, which have attendance limited to 50 persons, include:

"Conservative Oral Rehabilitation through the Use of Pin Retention," Dr. Peter E. Dawson, clinician;

"Case Presentation + Motivation + Performance = Successful Practice of Dentistry for Children," Dr. Roy M. Wolff, clinician;

"Demonstration and Elaboration of the Earl Pound Technique," Dr. James E. House, clinician, and

"The Rationale of Endodontic Therapy," Dr. J. B. Freedland, clinician.

For information and reservations, write Dr. Earl R. Canfield, 3280 Main Street, College Park, Georgia 30322.

17 Tar Heels Made Life Members

Seventeen members of the North Carolina Dental Society were among the 879 dentists elected to life membership by the House of Delegates of the American Dental Association meeting in Atlantic City October 14-17.

Tar Heel dentists so honored were: Clifford E. Abernethy, Raleigh; Frank O. Alford, Charlotte; John L. Ashby, Mount Airy; Victor E. Bell, Raleigh; Dewey Boseman, Wilson; Frank W. Davis, Asheville; John F. Hartness, St. Petersburg, Florida; Clyde D. Kistler, Randleman; Herbert S. Long, Graham; Jesse S. Moore, Reidsville; Gurney L. Overman, Goldsboro; James H. Parks, Kannapolis; Ollie L. Presnell, Asheboro; Charles H. Teague, Greensboro; Horace K. Thompson, Wilmington; Arthur L. Wooten, Wilson; and Thomas R. Zimmerman, High Point.

UNC Receives \$117,845

A grant of \$117,845 from the W. K. Kellogg Foundation to the School of Dentistry of the University of North Carolina will finance over a five-year period a widespread correspondence-extension program for the training of dental assistants.

Less than sixty-five per cent of practicing dentists now have a full-time dental assistant and many of the current aides are not being used at the place of their maximum effectiveness; i.e., at the chairside. It is hoped that the new correspondence-extension program will help to rout the extreme scarcity of trained dental assistants and thus to make possible the addition of many such auxiliaries as valued members of dental teams over the country.

Plans Set for N.C.D.H.W.

"Keep Your Smile" — the theme of National Children's Dental Health Week, February 2-8, 1964 — should become a familiar slogan to North Carolinians, at least to those who travel the highways. A giant-size replica of the poster advertising Children's Dental Health Week in full-color will appear on 56 billboards throughout the state.

This has been made possible through the efforts of local dental societies with the cooperation of outdoor advertising companies.

According to Dr. James A. Crawford, Chairman, Children's Dental Health Committee, radio and television stations in all areas of the state will broadcast programs which will emphasize the importance of dental care for children. Local den-

KEEP YOUR SMILE
National Children's Dental
Health Week • Feb. 2-8, 1964



tal societies have a full schedule of events planned for the observance of this important week and newspapers have offered their cooperation in support of it.

Through the courtesy of the General Electric Company, 18 automatic toothbrushes will be available as contest prizes. Information on how local societies may secure them will be sent out by Dr. Crawford to local society chairmen.

Oral Hygiene Division Awarded Grant

The North Carolina State Board of Health — Division of Oral Hygiene, has been awarded a grant from the U. S. Public Health Service to conduct a Community Cancer Demonstration Project.

The project, according to Dr. E. A. Pearson, Jr., Director of the Division of Oral Hygiene, is one of providing continuing education in oral cancer detection to practicing dentists in North Carolina.

In cooperation with the University of North Carolina, School of Dentistry, Departments of Oral Pathology and Oral Diagnosis; and the North Carolina Society of Pathologists, teaching teams are being selected to conduct seminars to provide the dentists with the latest techniques and methods in early detection of oral malignancies.

In 1961, 130 deaths in North Carolina were caused by cancer of the buccal cavity and pharynx, facial skin, lips, and jaw bone. This area is easily examined and all dentists have the opportunity to find many malignant lesions at a stage when the outlook for successful

Obituaries

Dr. Everett N. Biggerstaff, 66, of Spindale, a member of the First District, died December 24, 1963.

Dr. William F. Jones, 75, of North Wilkesboro, a retired member of the Second District, died June 14, 1963.

Dr. Walter L. McRae, 71, a life member of the Fourth District Dental Society, the North Carolina Dental Society and the American Dental Association, died November 11, 1963.

therapy is most promising. Cancer detection should be a vital part of a complete oral examination, and this is a part of the scope of this program, said Dr. Pearson.

During the course of the three-year project, the teaching teams will have conducted 35 seminars for the dental profession and will have traveled the entire state.

STATEMENT OF OWNERSHIP

THE JOURNAL of the North Carolina Dental Society is owned and published by North Carolina Dental Society, P. O. Box 11065, Raleigh, N. C. The Society has no stockholders, bondholders, mortgagees or other security holders. The magazine is published quarterly—January, April, August, September. Its circulation, to all members of the Society, averaged 1,423 for the four quarters preceding this issue. Editor is Dr. C. C. Diercks, Box 270, Morganton, N. C. Managing Editor is Andrew M. Cunningham, P. O. Box 11065, Raleigh, N. C.

The New Enlarged Program of

DISABILITY INSURANCE

EFFECTIVE ON JUNE 22, 1963 RENEWAL OUR PRESENT LOWER PREMIUM RATES FOR UNDER AGE 35 WILL BE EXTENDED TO INCLUDE MEMBERS UNDER AGE 40. PLEASE NOTE QUOTATIONS BELOW.

PLANS UP TO

- \$250.00 WEEKLY DISABILITY INCOME BENEFITS (\$1,080.00 monthly)
- \$20.00 PER DAY EXTRA HOSPITAL BENEFIT, AND UP TO \$225.00 SURGICAL BENEFITS FOR MEMBER AND DEPENDENTS (Optional)

PLAN A (Basic)

Lifetime Accident and 7 Years Sickness

Weekly Benefits	Dismemberment Benefits	Principal Sum For Accidental Death	SEMI-ANNUAL PREMIUMS	
			Premium Age 40 and over	†Reduced Premium To Age 40
\$250.00	Up to \$50,000.00	\$5,000.00	\$244.50	\$183.50
\$200.00	Up to \$40,000.00	\$5,000.00	\$196.50	\$147.50
\$150.00	Up to \$30,000.00	\$5,000.00	\$148.50	\$111.50
\$100.00	Up to \$20,000.00	\$5,000.00	\$100.50	\$ 75.50

PLAN AA (Long Term)

Lifetime Accident and For Sickness, from Inception of Disability To Your Attainment of Age 65

Weekly Benefits	Dismemberment Benefits	Principal Sum For Accidental Death	SEMI-ANNUAL PREMIUMS	
			Premium Age 40 and over	†Reduced Premium To Age 40
\$250.00	Up to \$50,000.00	\$5,000.00	\$292.00	\$219.25
\$200.00	Up to \$40,000.00	\$5,000.00	\$234.50	\$176.00
\$150.00	Up to \$30,000.00	\$5,000.00	\$177.00	\$133.00
\$100.00	Up to \$20,000.00	\$5,000.00	\$119.50	\$ 89.75

The premiums for Plan AA will be reduced to the same premium as for Plan A at age 58.

Note: The above rates **do not** increase at age 50 or even at age 60!

†On attaining age 40, age 40 rates apply on renewal.

J. L. CRUMPTON, State Mgr.

Professional Group Disability Division

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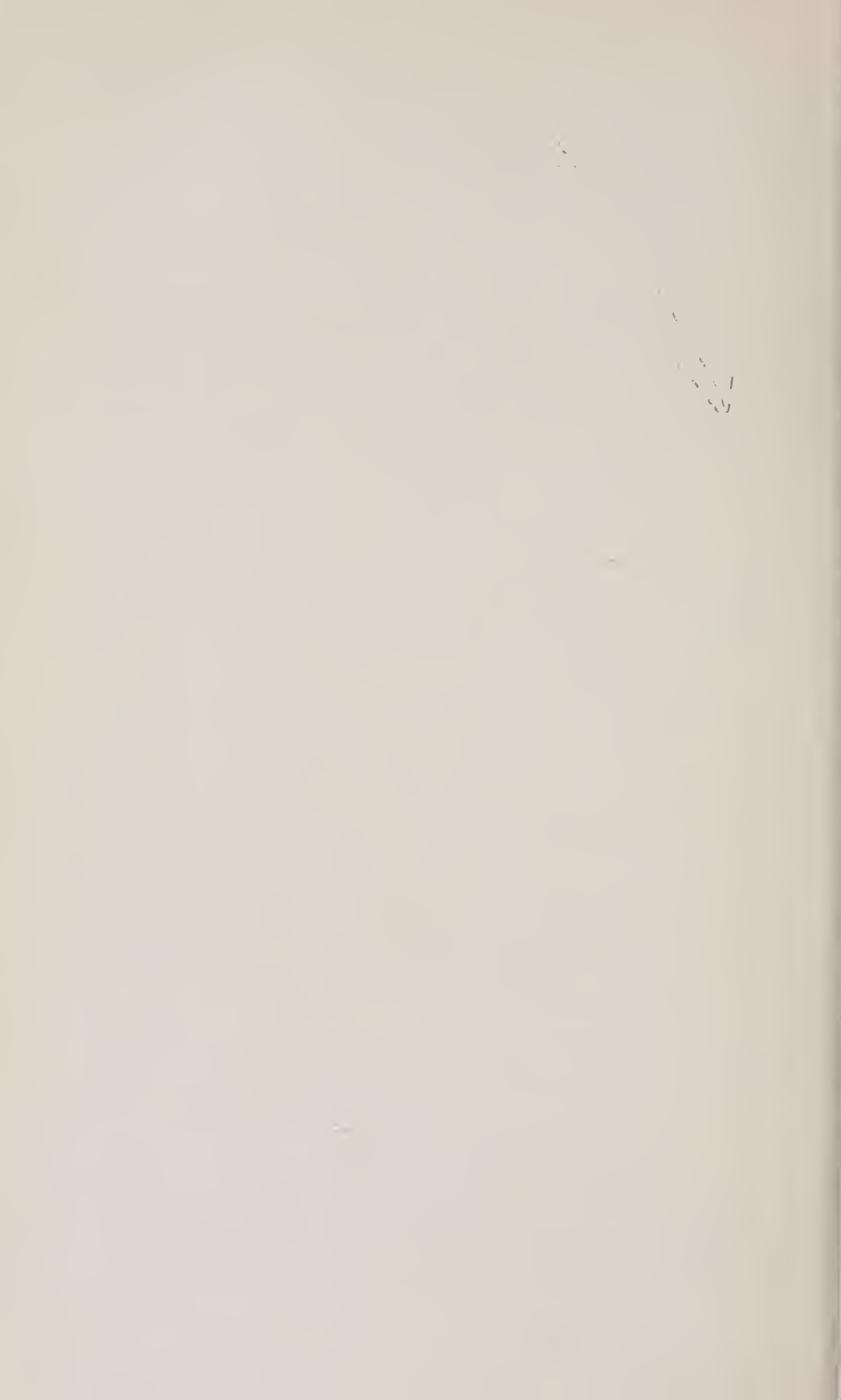
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The use of this roster as a general mailing list is prohibited except by specific authority.

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NORTH CAROLINA DENTAL SOCIETY

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1963-1964

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C. W. Poindexter (1966), 408 Elmwood Drive, Greensboro.....	27403
Edgar D. Baker (1964), 402 Ligon Bldg., 800 St. Mary's St., Raleigh.....	27605

NORTH CAROLINA STATE BOARD OF DENTAL EXAMINERS

President: Wade H. Breeland (1965), Breeland Bldg., Belmont.....	28012
Secretary-Treasurer: J. Homer Guion (1964), 602 Doctors Building, 1012 Kings Drive, Charlotte.....	28207
G. Shuford Abernethy (1966), 407 Second St., N.W., Hickory.....	28601
R. B. Barden (1964), 917 South 17th St., Wilmington.....	28403
S. L. Bobbitt (1966), 719 Professional Bldg., Raleigh.....	27601
S. W. Shaffer (1965), 421 Southeastern Bldg., Greensboro.....	27401

DELEGATES TO THE AMERICAN DENTAL ASSOCIATION

Chairman: Frank O. Alford (1964), 1001 Liberty Life Bldg., Charlotte.....	28202
Ralph D. Coffey (1965), P. O. Box 490, Morganton.....	28655
Z. L. Edwards (1966), P. O. Box 157, Washington.....	27889
Paul E. Jones (1966), 103 East Church Street, Farmville.....	27828
Erbie M. Medlin (1964), P. O. Box 176, Aberdeen.....	28315
C. C. Poindexter (1965), 314 Jefferson Bldg., Greensboro.....	27401

ALTERNATE DELEGATES TO THE AMERICAN DENTAL ASSOCIATION

T. G. Collins, 403 Ligon Bldg., 800 St. Mary's St., Raleigh.....	27605
Dennis S. Cook, 210 Norwood Street, Lenoir.....	28645
Darden J. Eure, 707 Bridgers St., Morehead City.....	28557
Barry G. Miller, 1529 Elizabeth Ave., Charlotte.....	28204
S. Byron Towler, 801 Professional Bldg., Raleigh.....	27601

NORTH CAROLINA DENTAL SOCIETY

STANDING COMMITTEES

Clinic Committee: James A. Harrell, Chairman; W. W. Ellis, Robert W. Holmes, W. Penn Marshall, T. B. Reid, Jr.

Constitution and Bylaws Committee: Z. L. Edwards (1966) Chairman; G. Shuford Abernethy (1968); D. T. Carr (1964); T. G. Nisbet (1965); Walter H. Finch, Jr. (1967).

Council on Dental Health: W. L. Hand, Jr. (1966), Chairman; E. A. Pearson, Jr. (1968); L. B. Peeler (1964); William D. Yelton (1965); Frank G. Atwater (1967).

Ethics Committee: Thomas M. Hunter (1967) Chairman; A. C. Current, Jr. (1964); W. Stewart Peery (1965); Norman F. Ross (1968); Horace K. Thompson (1966).

Exhibit Committee: W. Penn Marshall, Jr., Chairman; Gerald M. Cathey, Co-Chairman; Donald E. Bland, John W. Girard, Jr., W. F. Yelton.

Insurance Committee: John S. Dilday (1966), Chairman; T. L. Blair (1964); C. Don Gerdes (1965); Charles T. Barker (1967); J. S. D. Nelson (1968).

Legislative Committee: H. Royster Chamblee (1965), Chairman; S. W. Shaffer, Secretary, (1964); Paul E. Jones, (1966); Dennis S. Cook (1967); L. C. Holshouser (1968).

Library and History Committee: Neal Sheffield (1968) Chairman; Frank O. Alford (1964); S. H. Steelman (1965); M. M. Lilley (1966); H. Royster Chamblee (1967).

Membership Committee: Darden J. Eure, Chairman; J. W. Girard, Jr., H. P. Reeves, Jr., T. E. Sikes, Jr., William H. Oliver, James H. Lee.

Military and Veterans' Affairs Committee: J. H. Spillman (1967), Chairman; Coyte R. Minges (1964); Guy R. Willis (1965); H. E. Plaster (1966); T. Edwin Perry (1968).

Necrology Committee: Robert A. George (1968) Chairman; J. Ernest Roberts (1966); Dewey Boseman (1964); Marcus R. Smith (1965); W. T. Pennell (1967).

Program Committee: L. D. Herring, Chairman; Freeman C. Slaughter, Charles H. Teague, M. M. Forbes, M. W. Aldridge, Luther H. Butler.

Prosthetic Dental Service Committee: C. P. Osborne, Jr. (1968), Chairman; C. Z. Candler, Jr. (1964); C. D. Eatman (1965); Thomas L. Dixon (1966); James A. Harrell (1967).

Publicity Committee: T. E. Sikes, Jr. (1964) Chairman; Walter H. Davis (1965); W. Stewart Peery (1966); J. Henry Ligon, Jr. (1967); Charles T. Barker (1968).

Relief Committee: J. T. Lasley (1968) Chairman; J. W. Heinz (1964); S. L. Bobbitt (1965); W. E. Clark (1966); J. M. Kilpatrick (1967).

State Institutions Committee: K. L. Johnson (1968) Chairman; M. L. Cherry (1965); D. A. Jackson (1964); S. H. Isenhower (1966); Donald L. Henson (1967).

SPECIAL COMMITTEES

Annual Session Committee: L. D. Herring (Program) Chairman; D. W. Seifert, Jr. (Arrangements); James A. Harrell (Clinic); B. B. Sapp, Jr. (Entertainment); W. Penn Marshall, Jr. (Exhibits); Richard F. Hunt, Jr. (Hospitality); Worth M. Byrd (Monitor); Robert A. George (Necrology); Fred N. Ogden, II (Projected Clinics); T. E. Sikes, Jr. (Publicity); R. Bruce Warlick (Sports); John T. Hughes (Visual Education).

Arrangements Committee: D. W. Seifert, Jr., Chairman; Marvin E. Walker, W. Stewart Peery, C. A. Pless, Jr., R. A. Daniel, Jr.

Blue Shield-Blue Cross Committee: F. D. Bell (1964), Chairman; Grover W. Smith (1966); Vaiden B. Kendrick (1965).

Cancer Committee: Robert H. Sager, Chairman; John H. Dixon, Z. L. Edwards, Jr., Richard S. Hunter, Allen T. Lockwood.

Children's Dental Health Committee: James A. Crawford, Chairman; Lewis W. Lee, D. Clyde Young, Jr., Robert M. Kriegsmann, William A. Mynatt.

Corporate Practice Committee: J. H. Spillman, Chairman; H. C. Harrelson, Jr., C. W. Poindexter, J. Henry Ligon, Jr., T. E. Sikes, Jr., E. C. Kirkendol.

Dental Care for the Aged: H. O. Lineberger, Jr., Chairman; C. Z. Candler, Jr., W. W. Demeritt, Riley E. Spoon, Jr., Coyte R. Minges.

Dental Advisory Committee to the University of North Carolina: C. C. Poindexter, Chairman; D. T. Carr, S. L. Bobbitt, Wade H. Breeland, S. P. Gay, W. T. Ralph, Paul E. Jones, C. W. Sanders, W. T. Martin, Clyde E. Minges, Broadus S. Jones, Jr., George S. Alexander.

Dental Service Corporation Committee: Roy L. Lindahl, Chairman; S. H. Isenhower, Paul Fitzgerald, Jr., Wesley E. Kelley, J. S. D. Nelson, Pearce Roberts, Jr., Dan Wright, James M. Zealy.

Entertainment Committee: B. B. Sapp, Jr., Chairman; L. B. Barber, Jr., Henry C. Parker, R. R. Morrison, W. K. Griffin, W. H. Gray, Jr.

Hospitality Committee: Richard F. Hunt, Jr., Chairman; Marcus R. Smith, Horace P. Reeves, Jr., C. Robert VanderVoort, Colin P. Osborne, Jr., W. Howard Branch.

Monitor Committee: Worth M. Byrd, Chairman; Franklin G. Harris, Co-Chairman; David H. Freshwater, William E. Kidd, G. Curtis Wilson, James A. Leggette, Jr., Lewis W. Lee, James F. Hulin, Walter T. McFall, Jr., James H. Lehmann, Frank H. Daniel, Robert H. Gainey, J. Malcolm McAllister, William C. Keith, William G. Ware, Jr., Donald E. Bland, Edward N. Pridgen, Neal Sheffield, Jr., Junius H. Rose, Jr., Robert A. Yates.

School Health Coordinating Service Committee: Thomas B. Reid, Jr., Chairman; George S. Alexander, C. Z. Candler, Jr., T. Edgar Sikes, Jr., Thomas G. Collins.

Sports Committee: R. Bruce Warlick, Chairman; Marvin R. Evans, Thomas H. Byrd, Jr.

Study Club Committee: James H. Lee, Chairman; Fred N. Ogden, II, Vice Chairman; William H. Price, J. S. Moore, Henry S. Zaytoun, James L. Cox.

Study Committee on Dental Hygienists: George S. Alexander, Chairman; Barry G. Miller, F. C. Slaughter, C. W. Poindexter, G. Curtis Wilson.

Visual Education Committee: John T. Hughes, Chairman; Sanford W. Thompson, III, C. E. Crandell.

SPECIAL ADVISORS TO:

N. C. Dental Assistants Association: Paul Fitzgerald, Jr.

N. C. Dental Hygienists Association: G. Curtis Wilson.

DISTRICT SOCIETIES

FIRST DISTRICT DENTAL SOCIETY 1963-1964

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A. C. Riddle, Jr., Asheville.....	Vice President
John W. Girard, Jr., Asheville.....	Secretary-Treasurer
Cecil A. Pless, Jr., Asheville.....	Editor

DELEGATES

A. B. Breland	M. M. Forbes
M. W. Carpenter	John W. Girard, Jr.
C. B. Taylor	

EXECUTIVE COMMITTEE

F. A. Buchanan	John W. Girard, Jr.
F. S. Cunningham	Cecil A. Pless, Jr.
M. M. Forbes	A. C. Riddle, Jr.
C. B. Taylor	

COMMITTEES

Audit: C. W. McCall, Chairman; A. R. Heffner, James L. Price.

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Clinic: A. P. Cline, Jr., Chairman; Gene L. Reese, Omer W. Taylor, Curley G. Walker.

Ethics: A. C. Current, Jr., Chairman; F. C. Shaw, R. A. Warren.

Golf: R. R. Hoffman, Chairman.

Hospitality: F. N. Ogden, II, Chairman; J. F. Lemler, Pearce Roberts, Jr.

Local Arrangements: Robert W. Holmes, Chairman; E. K. Rogers, III, Hugh H. Cole, C. Z. Candler, Jr., T. A. Morris.

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Necrology: John T. Adair, Chairman; W. H. Breeland, Moultrie H. Truluck.

Nominating: A. T. Lockwood, Chairman; S. H. Isenhower, R. L. Falls.

Program: C. B. Taylor, Chairman; C. C. Diercks, R. E. Fair, R. P. Hagaman.

Publicity: Cecil A. Pless, Jr., Chairman; J. D. Bost.

Relief: D. G. Frye, Jr., Chairman; J. B. Graham, Albert P. Cline.

SECOND DISTRICT DENTAL SOCIETY 1963-1964

OFFICERS

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J. H. Spillman, Winston-Salem.....	Vice President
Horace P. Reeves, Jr., Charlotte.....	Secretary-Treasurer
William G. Ware, Jr., Winston-Salem.....	Editor

DELEGATES

James A. Bingham, Jr.	Robert A. George
J. B. Freedland	Horace P. Reeves, Jr.
Paul A. Stroup	

EXECUTIVE COMMITTEE

J. B. Freedland	Horace P. Reeves, Jr.
Robert A. George	J. H. Spillman
C. Robert Helsabeck	Fleming H. Stone

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- Entertainment:** Richard F. Scherer, Chairman; Norman J. Duncan, William E. Crow, Charles A. Jarrett, Clarence F. Biddix.
- Ethics:** W. Stewart Peery, Chairman; John R. Pharr, John L. Ashby.
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- Insurance:** R. Philip Melvin, Chairman; Frank H. Walker, John H. Dixon.
- Local Arrangements:** O. J. Freund, Chairman; David L. Beavers, Kenneth H. Meadows, Carl A. Barkley.
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- Monitoring:** Robert W. Clinard, Chairman; Joseph C. Farthing, Dwight A. Jackson, John G. Lee, Robert C. Burroughs, Jr., Ralph B. Campbell.
- Necrology:** P. C. Hull, Jr., Chairman; Broadus E. Jones, Jr., Rufus G. Hoover.
- Nominating:** James E. Graham, Jr., Chairman; L. C. Holshouser, James A. Harrell, William F. Yelton.
- Program:** Robert Long, Chairman; Boyce A. Brawley, J. H. Nicholson, F. Glen Gaither, Thomas L. Blair.
- Projected Clinics:** Frank R. Graham, Chairman; Sidney D. Petersen, Jr., W. Frederick Riddle, M. Stevenson Thurston.
- Projection:** Douglas M. Young, Chairman; Thomas A. Smith, Robert H. Watson, Donald C. Evans.
- Relief:** J. P. Reece, Chairman; J. Donald Kiser, R. B. Harrell.
- Table Clinics:** W. Smith Kirk, Chairman; Charles M. Westrick, Barry G. Miller, Harry N. Baldwin, John H. Jarrett.

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B. B. Sapp, Jr., Durham.....	President
T. E. Sikes, Jr., Greensboro.....	President-Elect
W. Harrell Johnson, Southern Pines.....	Vice President
Charles W. Horton, High Point.....	Secretary-Treasurer
Neal Sheffield, Jr., Greensboro.....	Editor

DELEGATES

John S. Dilday (1965)	M. B. Richardson (1964)
C. W. Horton	B. B. Sapp, Jr.
T. E. Sikes, Jr.	

EXECUTIVE COMMITTEE

John S. Dilday (1964), Chairman	
C. W. Horton	James B. Howell (1966)
W. Harrell Johnson	B. B. Sapp, Jr.
Ludwig G. Scott (1965)	T. E. Sikes, Jr.

COMMITTEES

Arrangements: C. F. Clark, Jr., Chairman; M. L. Cherry, Riley S. Stallings, Jr., Marvin E. Walker.

Auditing: Charles A. Reap, Chairman; Guy V. Harris, H. V. Murray, Jr.

Children's Dental Health: Duncan M. Getsinger, Chairman; W. Robert Wentz, James B. King, Jr.

Clinic: W. W. Ellis, Chairman; Samuel T. Hart, Roger E. Sturdevant.

Constitution and Bylaws: C. Robert VanderVoort, Chairman; Robert L. Daniel, Charles H. Sugg.

Ethics: Norman F. Ross, Chairman; P. B. Whittington, Jr., T. L. Dixon.

Golf: R. W. Sugg, Chairman; R. J. Citrini.

Legislative: S. W. Shaffer, Chairman; W. L. Saunders, T. D. Stokes, Jr.

Membership: W. Harrell Johnson, Chairman; B. E. Kanoy, B. M. Brannan, Jr., J. A. Stephens, John W. Menius.

Necrology: J. Ernest Roberts, Chairman; LeRoy K. Heath, John D. Southworth.

Program: Guy R. Willis, Chairman; A. Dwight Price, Marion L. Ralls, Jr.

Public Education: John B. Sowter, Chairman; Galen W. Quinn, Frank G. Atwater.

Publicity: L. P. Megginson, Chairman; Charles T. Byerly, Jr., W. Kenneth Young.

Relief: Luther H. Butler, Chairman; Robert M. Kriegsman, C. I. Miller.

FOURTH DISTRICT DENTAL SOCIETY 1963-1964

OFFICERS

L. D. Herring, Raleigh.....	President
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L. A. Cameron, St. Pauls.....	Vice President
William H. Oliver, Smithfield.....	Secretary-Treasurer
Paul Fitzgerald, Jr., Raleigh.....	Editor

DELEGATES

Worth M. Byrd	J. Henry Ligon, Jr.
L. D. Herring	William H. Oliver
Nash H. Underwood	

EXECUTIVE COMMITTEE

Robert T. Byrd, Chairman	
Lawrence A. Cameron	L. D. Herring
Thomas G. Collins	J. Henry Ligon, Jr.
William H. Oliver	

COMMITTEES

Clinic: C. P. Osborne, Jr., Chairman; L. J. Moore, Jr., Joseph M. Johnson, Gordon L. Townsend, C. B. Ledbetter.

Constitution and Bylaws: E. A. Pearson, Jr., Chairman; James E. Swindell, Everett L. Smith, J. R. Edwards, Jr.

Entertainment: F. D. Bell, Chairman; D. W. Seifert, Jr., Roy L. Earp, Don F. Jackson, Ruth T. Jackson, Robert R. Morrison, Lloyd B. Stanley.

Ethics: Thomas M. Hunter, Chairman; J. R. Edwards, Nash H. Underwood, Thomas G. Collins.

Hospitality: Paul Fitzgerald, Jr., Chairman; Edward N. Pridgen, Henry O. Lineberger, Jr., Vonnie B. Smith, Virgil M. Morrison.

Insurance: James H. Edwards, Chairman; Clemuel M. Johnson, Jere E. Roe.

Membership: Lawrence A. Cameron, Chairman; Worth M. Byrd, W. I. Herring, H. Royster Chamblee, Rufus S. Jones.

Mental Institutions: J. S. D. Nelson, Chairman; Eli J. Attayek, R. L. Horton, S. H. Massey, Jr.

National Children's Dental Health Week: J. Fred Sproul, Chairman; Thomas Q. Sneed, Jr., Newton Smith, Joseph T. Hunt, R. H. Turlington.

Necrology: Marcus R. Smith, Chairman; W. W. Rankin, R. M. Olive, Marvin T. Jones, Jr.

Post Graduate Study: T. Edwin Perry, Chairman; William P. Tally, Rollin M. Ransom, M. P. Nicholson, Jr.

Program: J. Henry Ligon, Jr., Chairman; E. D. Baker, Glenn F. Bitler, C. P. Osborne, Jr., R. R. Renfrow.

Publicity: Henry S. Zaytoun, Chairman; J. P. Hale, J. Malcolm McAllister.

Relief: S. L. Bobbitt, Chairman; Sanford W. Thompson, III, Cleon W. Sanders, Lawrence H. Paschal, Kenneth L. Johnson.

School Health: Thomas H. Harris, Chairman; Zyba K. Massey, David B. Masters, Darwin W. McCaffity, David E. Cook.

FIFTH DISTRICT DENTAL SOCIETY 1963-1964

OFFICERS

W. L. Hand, Jr., New Bern.....	President
C. P. Godwin, Rocky Mount.....	President-Elect
L. R. Turner, Jacksonville.....	Vice President
James H. Lee, Mount Olive.....	Secretary-Treasurer
W. B. Gilbert, Jr., New Bern.....	Editor

DELEGATES

M. W. Aldridge	R. H. Gilbert
C. T. Barker	W. T. Ralph
G. Curtis Wilson	

EXECUTIVE COMMITTEE

C. P. Godwin	W. L. Hand, Jr.
Richard F. Hunt, Jr.	E. Smith Jewell
James H. Lee	L. R. Turner

COMMITTEES

Arrangements: Lewis P. Bratton, Co-Chairman; C. T. Barker, Co-Chairman; Harvey W. Civils, Roy A. Miller, C. C. Gooding, A. L. Stoddard, W. B. Gilbert, Jr., Charles B. Johnson (New Bern), William L. Hammond.

Auditing: W. H. Gray, Chairman; David H. Freshwater, R. E. Williams.

Constitution and Bylaws: Z. L. Edwards, Chairman; W. K. Morgan, Britton F. Beasley, Linus M. Edwards, Jr.

Dental Caries: W. S. Linville, Chairman; Mett B. Ausley, George L. Edwards, Jr.

Dental Relief: B. McK. Johnson, Chairman; Coyte R. Minges, Charles S. Cooke, A. D. Johnson.

Disaster Preparedness: Roy A. Miller, Chairman; R. A. Daniel, Jr., M. M. Lilley, R. A. Wilkins.

Ethics: H. K. Thompson, Chairman; C. C. Gooding, T. S. Fleming, Jack E. Silvers, T. C. Boykin.

Membership: L. R. Turner, Chairman; Myron H. Ennis, Jay Mack Collie, Garland R. Homes, Thomas L. Vinson, Jr., Carter T. Bennett.

Mouth Guard: W. E. Kidd, Chairman; W. M. Spencer, Lloyd E. Griffin, Donald E. Bland, Fabian Morgan, W. S. Ketcham.

National Children's Dental Health Week: L. W. Lee, Chairman; Walter S. Linville, F. H. Howdy, Raymond C. Whitehurst, Jr., Donald L. Henson, T. B. Reid, Jr., David H. Freshwater, R. A. Carnevale, Ledyard E. Ross, E. S. Jewell.

Necrology: C. B. Johnson (New Bern), Chairman; C. B. Johnson (Jacksonville), E. L. Eatman.

Nominating: R. H. Gilbert, Chairman, R. A. Daniel, Jr., R. B. Barden, W. H. Gray.

Program: Charles P. Godwin, Chairman; J. M. Zealey, C. W. Daughtry, J. F. Fraser.

Resolutions: H. W. Gooding, Chairman; Dan Wright, C. D. Eatman, Z. L. Edwards, Jr.

Study Club: James H. Lee, Chairman; C. J. Demary, Sidney V. Allen, Badger G. Clark, Jr., H. F. Civils.

Seminar: R. H. Gilbert, Chairman; R. Hogan Gaskins, Jr., Marvin W. Aldridge.

Table Clinics: J. L. Cox, Chairman; E. K. Wright, W. S. O'Berry, H. D. Browning.

NORTH CAROLINA DENTAL SOCIETY

ALPHABETICAL ROSTER OF MEMBERS

January 1, 1964

(Districts are indicated by number immediately following the name.)

	Zip Code
—A—	
Abernethy, C. E. (4) 705 Professional Bldg., Raleigh.....	27601
Abernethy, Charles V. (1) Powell St., Forest City.....	28043
Abernethy, David (1) Abernethy Professional Bldg., Hickory.....	28601
Abernethy, G. Shuford (1) 407 Second St., N.W., Hickory.....	28601
Adair, John T. (1) 116 N. College Ave., Newton.....	28658
Adams, C. A., Jr. (3) Wachovia Bank Bldg., Durham.....	27701
Adams, C. A., III (3) Wachovia Bank Bldg., Durham.....	27701
Adams, Roy G. (3) Box 188, Hamlet.....	28345
Adcock, George W., Jr. (4) North Main St., Fuquay Springs.....	27526
Agress, Bernard D. (2) Blalock Bldg., Pilot Mountain.....	27041
Albright, L. B. (2) 311 Independence Bldg., Charlotte.....	28202
Aldridge, M. W. (5) 1005 E. Fourth St., Greenville.....	27834
Alexander, George S. (2) 323 Professional Bldg., Kannapolis.....	28081
Alexander, W. E. (3) Robbins.....	27325
Alford, Frank O. (2) 1001 Liberty Life Bldg., Charlotte.....	28202
Allen, Don L. (3) 24 at 1700 Murfin, Ann Arbor, Michigan.....	48105
Allen, Howard L. (4) Box 503, Henderson.....	27536
Allen, Sidney V. (5) 3901 Oleander Drive, Wilmington.....	28403
Allen, Thomas I. (2) 816 Poindexter Drive, Charlotte.....	28209
Almond, C. Franklin (3) 234 Settle St., Reidsville.....	27320
Alspaugh, Laurence S. (3) 1025 Madison Ave., Greensboro.....	27401
Anderson, George D. (3) Box 228, Southern Pines.....	28387
Anderson, G. N. (3) 206 Church St., High Point.....	27260
Andrews, James E. (2) 715 Hospital St., Mocksville.....	27028
Andrews, John L., Jr. (3) 608 N. Main St., High Point.....	27260
Andrews, Victor L., Jr. (2) 715 Hospital St., Mocksville.....	27028
Apple, Howard D. (3) Box 1583, Burlington.....	27216
Archer, John M., III (2) 126 Cottage Place, Charlotte.....	28207
Ashby, John L. (2) Box 728, Mount Airy.....	27030
Attayek, Eli J. (4) Box 7588 Station B, Raleigh.....	27602
Atwater, Frank G. (3) 1202 Madison Ave., Greensboro.....	27403
Atwater, John W., Jr. (3) 130 Scarboro St., Asheboro.....	27203
Ausband, Samuel P. (2) 3720 Reynolda Rd., Winston-Salem.....	27106
Ausley, Mett B. (5) Box 476, Warsaw.....	28398
Austin, Edward U. (2) 505 Doctors' Bldg., Charlotte.....	28207
—B—	
Bain, C. D. (4) Box 466, Dunn.....	28334
Baker, Benjamin R. (3) UNC School of Dentistry, Chapel Hill.....	27515
Baker, E. D. (4) 402 Ligon Bldg., 800 St. Mary's St., Raleigh.....	27605
Baker, Luther P. (1) Box 827, Kings Mountain.....	28086
Baker, Robert N. (1) Box 827, Kings Mountain.....	28086
Baker, Thomas P. (1) Box 827, Kings Mountain.....	28086
Baldwin, Harry N. (2) P. O. Box 1006, North Wilkesboro.....	28659
Ballard, David L. (2) 1613 Montford Drive, Charlotte.....	28209
Banker, L. L., Jr. (2) 524 Professional Bldg., Charlotte.....	28202
Barber, A. D. (4) Box 406, Sanford.....	27331

Barber, L. B., Jr. (1) 5th Ave. Clinic, 726 Fifth Ave., Hendersonville.	28739
Barden, R. B. (5) 916 South 17th St., Wilmington.	28403
Barker, Bennie D. (3) UNC School of Dentistry, Chapel Hill.	27515
Barker, C. T. (5) 514 Broad St., Apt. A-1, New Bern.	28560
Barker, O. C. (1) P. O. Box 486, Asheville.	28802
Barkley, Carl A. (2) 740 Nissen Bldg., Winston-Salem.	27101
Barnes, V. M. (5) Box 1426, Wilson.	27894
Barringer, Martin D. (2) 1516 Elizabeth Ave., Charlotte.	28204
Barringer, M. R. (1) P. O. Box 386, Newton.	28658
Bartis, Nicholas J. (3) 2309 Friendly Rd., Greensboro.	27403
Barton, Roger E. (3) UNC School of Dentistry, Chapel Hill.	27515
Bawden, James W. (3) UNC School of Dentistry, Chapel Hill.	27515
Beam, R. S. (4) 2011 Clark Ave., Raleigh.	27605
Bean, William C. (2) 2433 The Plaza, Charlotte.	28205
Beasley, Britton F. (5) Kinston Clinic, Kinston.	28501
Beavers, D. L. (2)	
Bowman Gray School of Medicine, Winston-Salem.	27103
Beavers, Franklin C. (2) 3734 Reynolda Rd., Winston-Salem.	27106
Bebber, James V. (3) 720 Morgan Rd., Spray.	27352
Beck, Charles H. (4) 1677 Owen Dr., Fayetteville.	28304
Becker, D. H. (1) 704 Flatiron Bldg., Asheville.	28801
Bell, Franklin D. (4) 600 Wade Ave., Raleigh.	27607
Bell, John T. (3) 1010-111 Corcoran St., Durham.	27701
Bell, Morris L. (4) 204 Sampson St., Clinton.	28328
Bell, Victor E. (4) 225 Hillcrest Rd., Raleigh.	27605
Bellois, W. B. (5) P. O. Box 1024, Wilmington.	28402
Bencini, E. A. (3) 330 Locke St., High Point.	27260
Benfield, Robert H. (2) 1508-09 Liberty Life Bldg., Charlotte.	28202
Bennett, Carter T. (5) 128½ E. Water St., Plymouth.	27962
Bennett, Jack (2) Suite 204 Professional Bldg., Winston-Salem.	27103
Benson, E. S., Jr. (5) 9 North 17th St., Wilmington.	28403
Bentley, C. W. (2) Hayes Bldg., North Wilkesboro.	28659
Bentley, Keith L. (2) Box 486, North Wilkesboro.	28659
Biddell, Alex J. (4) Box 628, Laurinburg.	28352
Biddell, F. H. (4) Laurinburg.	28352
Biddix, Clarence F. (2) 225 N. Torrence St., Charlotte.	28204
Bingham, J. P. (2) Bingham Clinic, West Center St., Lexington.	27292
Bingham, J. P., Jr. (2) Box 124, Lexington.	27292
Bird, Charles W. (1) 10-D East Main St., Ferguson Bldg., Sylva.	28779
Bishop, E. L. (2)	
1630 Mockingbird Dr., Graham Park Prof. Bldg., Charlotte.	28209
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Dickey, Harry (1) Murphy.....	28906
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Edwards, J. R., Jr. (4) Fuquay Springs.....	27526
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Ezzell, L. L. (1) Andrews.....	28901

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Turner, R. S. (3) 811 N. Elm St., Greensboro.....	27401
Twisdale, Harold W. (2) 4421 Central Ave., Charlotte.....	28205

—U—

Underwood, Alvin E. (3) Seawell Bldg., Carthage.....	28327
Underwood, J. T. (3) Clay's Apt. House, Blackstone, Va.....	23824
Underwood, Nash H. (4) 814 S. Main St., Wake Forest.....	27587
Underwood, R. L. (3) 410 Guilford Bldg., Greensboro.....	27401
Upchurch, Jack B. (4) P. O. Box 636, Apex.....	27502

—V—

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Sandhills Dental Clinic, U.S. 1, Aberdeen.....	28315
Vinson, Thomas W., Jr. (5) 106 Main St., Murfreesboro.....	27855
Voils, C. U. (2) 2215 Academy St., Mooresville.....	28115
Vollmer, T. D. (3)	
Medical Village, Suite J, 1610 Vaughn Rd., Burlington.....	27218

—W—

Waddell, M. A. (4) Scottish Bank Bldg., Fair Bluff.....	28439
Wadsworth, Charles H. (2) 180 N. Union St., Concord.....	28025
Walker, Curley G. (1) 252 Charlotte St., Asheville.....	28801
Walker, Frank H. (2) P. O. Box 37, Yadkinville.....	27055
Walker, M. E. (3) 1431 Broad St., Durham.....	27705
Walker, Woodrow W. (1) 317 S. Marietta St., Gastonia.....	28052
Wall, Joe Thomas (5) 216 Broad St., Wilson.....	27893
Wall, Lester E. (2) 706 Independence Bldg., Charlotte.....	28202
Wallace, Mitchell W. (4) Spring Lake.....	28390
Waller, D. T. (2) 301-C Hawthorne Lane, Charlotte.....	28204
Walters, Percy Frank (2) P. O. Box 251, Monroe.....	28110
Ward, E. Ben (4) 511 S. Franklin St., Whiteville.....	28472
Ward, James A. (5) 228 Vance St., Roanoke Rapids.....	27870
Ware, William G., Jr. (2) 505 Nissen Bldg., Winston-Salem.....	27101
Warlick, R. B. (3) Box 331, Southern Pines.....	28387
Warren, Bert B. A03113423 (5)	
USAF Hospital, Box 374, APO 220, New York, N. Y.	
Warren, Donald W. (3) UNC School of Dentistry, Chapel Hill.....	27515
Warren, E. R. (5) P. O. Box 845, Goldsboro.....	27530
Warren, Ray Alexander (1) 330 S. Grove St., Lincolnton.....	28092
Watson, Robert H. (2) 4200 Park Rd., Charlotte.....	28209
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Waynick, I. M. (2) 731 Nissen Bldg., Winston-Salem.....	27101
Weant, Theodore F. (2) 529 Catawba Rd., Salisbury.....	28144
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Weathersbee, Ramsey, Jr. (5) 918 S. 17th St., Wilmington.....	28403
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Wells, Carey T., Jr. (1) 100 Main St., Canton.....	28716
Wells, DeLeon, Jr. (5) Wallace.....	28466
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Whisnant, C. M. (1) Burnsville.....	28714

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Whitehead, J. W. (4) Box 465, Smithfield.....	27577
Whitehurst, Raymond C., Jr. (5) 519 Broad St., Wilson.....	27893
Whitehurst, R. L. (5) Box 207, Rocky Mount.....	27802
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Wiggs, William J. (4) 2704 Fort Bragg Rd., Fayetteville.....	28303
Wilkins, Ralph A. (3) Box 828, Burlington.....	27216
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Williams, H. T. (1)	
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Willis, Guy R. (3) 910 Central Carolina Bank Bldg., Durham.....	27701
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Winchester, P. W. (1) Box 628, Morganton.....	28655
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Woltz, William Lee, Jr. (4) Box 257, Sanford.....	27331
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Woodall, D. C. (4) Box 37, Erwin.....	28339
Woodard, W. L. (5) Beaufort.....	28516
Woodard, Warden Lewis, Jr. (4)	
Garner Professional Center, Rt. 1, Garner.....	27529
Woody, F. Spencer (3) Roxboro.....	27573
Woody, J. L. (1) Box 335, Bryson City.....	28731
Woody, L. W. (1) Box 556, Spruce Pine.....	28777
Woody, L. W., Jr. (1) Box 556, Spruce Pine.....	28777
Woody, M. E., Jr. (1) 318 South St., Gastonia.....	28052
Woody, W. L. (1) 318 South St., Gastonia.....	28052
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Wooten, George A. (5) Box 163, Snow Hill.....	28580
Wright, Dan (5) 602 East 10th St., Greenville.....	27834
Wright, E. K., Jr. (5) Box 48, Williamston.....	27892

—Y—

Yates, P. P. (1) Hedrick Bldg., Lenoir.....	28645
Yates, Robert A. (4) Box 465, Chadbourn.....	28431

Yelton, John L. (1) Box 35, Shelby.....	28150
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Yelton, W. F. (2) 531 Nissen Bldg., Winston-Salem.....	27101
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Yokeley, K. M. (2) 767 Oaklawn Ave., Winston-Salem.....	27104
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Young, Thurman L. (4) 920 W. Johnson St., Raleigh.....	27605
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Zibelin, C. V. (5) Box 407, Wallace.....	28466
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Zimmerman, L. H. (3) Security Bank Bldg., High Point.....	27260
Zimmerman, L. R. (3) Security Bank Bldg., High Point.....	27260
Zimmerman, T. R. (3) Security Bank Bldg., High Point.....	27260
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Nance, A. W. (4) Point Harbor.....	27964
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Ferro, Edward R.
Leary, Thomas E.

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Garber, M. R.
Miller, C. I.
Overcash, R. F.
Richardson, Maurice B.
Smith, Robert L.
Stonestreet, F. M.

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Upchurch, Jack B.

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Reeves, James D.

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Cunningham, F. S.
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Davis, Walter H.
Dennis, Bill
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Hooper, Lyman J.
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Keener, Harold
Kennerly, Robert B.
Lemler, John F.
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Morris, Thomas A.
Mundy, Carl R.
Mynatt, William A.
Patterson, G. K.
Pennell, William T.
Pless, C. A.
Pless, Cecil A., Jr.
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Riddle, A. C., Jr.
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Roberts, Pearce, Jr.
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Shapiro, Eugene N.
Sherrill, Claude A., Jr.
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Weaver, R. C.

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Gooding, Herbert W.

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Woodard, W. L.

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Hagerty, Edward H.
Moses, Joseph M.
Suggs, Robert B.
Taylor, Preston R.

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Sanders, Cleon W.

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Pruett, J. E.

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Love, James H.
Marshburn, J. A.

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Graham, James B.
Lawrence, Jack D.
Matheson, William M.
Reese, Gene L.

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Lee, John G.

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Davis, Wilburn A.
Grahl, Carol Linwood, Jr.
Johnson, Carol H.
Prugh, John L.

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Crisp, J. E.
Woody, J. L.

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Brannock, R. W.
Caddell, F. S.
Coble, Albert V.
Easley, Ernest E.
Foushee, L. M.
Frost, J. S.
Garrison, N. W.
Gilliam, F. E.

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McKenzie, Owen Ray
Moore, Saunders W.
Moser, Galen C.
Murray, Henry V.
Newman, Joseph B.
Patterson, George G.
Perdue, H. L.
Roberts, J. Ernest
Scott, Ludwig G.
Slott, E. F.
Stephens, John A.
Vollmer, T. D.
Wilkins, Ralph A.

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Whisnant, C. M.

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Ramos, Frank Mayo

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Burns, William D.

CANDLER, 1st District

Cole, Hugh H.

CANDOR, 3rd District

McDuffie, A. A.

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Bottoms, Alton W.
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Cline, Albert P., Jr.
Hair, J. E.
Powell, William H.
Rhea, R. C.
Wells, C. T.
Wells, Carey T., Jr.

CARRBORO, 3rd District

Kennedy, K. Carroll

CARTHAGE, 3rd District

Underwood, Alvin E.

CARY, 4th District

Davis, Edwin B., Jr.
Hamilton, R. P.
Hatcher, Hubert E.

CHADBOURN, 4th District

Yates, Robert A.

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Barker, Bennie D.
Barton, Roger E.
Bawden, James W.
Brauer, John C.

Burns, E. R.
 Burns, William T.
 Cathey, Gerald M.
 Chapin, M. E.
 Clark, Dwight L.
 Crandell, C. E.
 Cummings, Paul M., Jr.
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 Demeritt, W. W.
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 Harper, Cynthia S.
 Higley, L. B.
 Holland, Murry W.
 Hunter, Grover C., Jr.
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 Lupton, Cecil Rhodes
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 Mitchell, Patricia S.
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 Schneider, William Gene
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 Sturdevant, R. E.
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 Webster, William P.
 Wood, Matthew T.

CHARLOTTE, 2nd District

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 Ballard, David L.
 Banker, L. L., Jr.
 Barringer, Martin D.
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 Benfield, Robert H.
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 Bishop, E. L.
 Black, A. R.
 Bumgardner, A. S.
 Bumgardner, L. Franklin
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 Campbell, Ralph B.
 Cash, Allan H.

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 Cooley, Julius Richard
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 Craig, Joe B.
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 Evans, Donald C.
 Fox, Burke W.
 Freedland, J. B.
 Funderburk, Ervin M.
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 Graham, Frank R.
 Graham, James E., Jr.
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 Hamer, Thomas N.
 Harrelson, Henry C., Jr.
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 Hoover, Dan C.
 Hoover, R. G.
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 Hull, P. C., Jr.
 Hull, Robert H.
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 Jarrett, Clyde H., Jr.
 Jarrett, John H.
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 Keiger, Cyrus C.
 Kendrick, Vaiden B.
 Kendrick, Z. Vance, Jr.
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 Peery, W. Stewart
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Porter, William J.
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 Rehm, Jerome G.
 Reitzel, Larston L.
 Reynolds, John A. S.
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 Ross, Grady
 Ross, Heywood
 Schmucker, Ralph
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 Smith, James R.
 Stone, Fleming H.
 Storey, Frederick B.
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 Taylor, Lois E.
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 Troutman, Dennis F.
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 Wall, Lester E.
 Waller, D. T.
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 Webster, B. H.
 Williams, Egbert P.
 Williford, William E.
 Wilson, Roy W.
 Winter, Carlton V.

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McKee, Raymond A.
 Smith, Ray Hoyle

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Thompson, Harold W.

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 Tew, J. J.

CLEMMONS, 2nd District

Nifong, Paul D.

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Hunt, John J.

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 Herring, W. I.
 Jackson, Wilbert
 Powell, J. B.
 Turlington, R. H.

CLYDE, 1st District

Miller, George I.

COLUMBUS, 1st District

Oliver, John Nelson

CONCORD, 2nd District

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 Corl, Marshall B.
 Davis, Joe V., Jr.
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 Furr, Curtis E.
 Harrell, Daniel B., Jr.
 Jones, B. E., Jr.
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 Reece, J. P.
 Sapp, Hubert B.
 Wadsworth, Charles H.
 Zuccarella, James B.

CONOVER, 1st District

Canrobert, C. W., Jr.
 Drum, Borden C.

CONWAY, 5th District

Clark, George E.

CROSSNORE, 1st District

Sloop, W. M.

DAVIDSON, 2nd District

Withers, R. M.

DENTON, 2nd District

Franklin, A. J.

DOBSON, 2nd District

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 Thompson, John L., Jr.

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 Hooper, Glenn L.
 Jernigan, J. A.
 Jernigan, Jerry O'D.
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 Townsend, Gordon L.

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 Bowling, Howard X.
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 Carr, Daniel T.
 Carr, Henry C.
 Cherry, M. L.
 Citrini, Richard J.
 Clark, C. F., Jr.
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 Dixon, T. L.
 Dorton, John
 Draughon, Donald R.
 Draughon, Wallace R.
 Georgiade, N. G.
 Getsinger, Duncan M.

Griffin, W. Kimball
 Harris, Guy V.
 Heath, LeRoy K.
 Howell, W. C.
 Kanoy, B. Edmond
 Kirkland, George F., Jr.
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 Little, Thomas A.
 Mainwaring, John W., Jr.
 Monk, Henry L., Jr.
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 Ross, Norman F.
 Ross, Thurman J.
 Sapp, Baxter B., Jr.
 Stallings, June H., Jr.
 Stallings, Riley S., Jr.
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 Walker, M. E.
 Wentz, William R.
 Willis, Guy R.
 Youmans, Charles P.

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 Garriott, Rosebud Morse

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 Griffin, Wallace S.
 Hart, W. I.
 Hines, Richard N., Jr.

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 Griffin, Lloyd E.
 Nixon, Henry E.
 Riggs, A. F.
 Spence, W. M.

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 Johnson, Clemuel Mansey
 Keith, William C.

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 Harrell, R. B.
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 Schiebel, E. C.

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 Maddox, James H.
 Qualls, Dixon L.

ERWIN, 4th District
 Woodall, D. C.

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 Waddell, M. A.

FAIRMONT, 4th District
 Fields, Paisley
 Floyd, Daniel J.
 Purvis, P. C.

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 Bowden, H. B.

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 Lackey, A. A.

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 Gainey, Robert H.
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 Grimes, William F.
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 Lessem, Robert B.
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 Mohn, R. L.
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 Olive, R. M.
 Olive, R. M., Jr.
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 Smith, Newton
 Taylor, Robert Brown
 Wiggs, William J.

FLETCHER, 1st District
 Port, Forest Chester

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 Eaker, Yates H.
 Griffith, Charles Lee
 Mauney, R. G.

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 Furr, Walter E.
 Grant, Ben P.
 Henson, David E.
 Lawrence, Eugene W., Jr.

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 Eakes, S. E.

FUQUAY SPRINGS, 4th District
 Adcock, George W., Jr.
 Edwards, J. R.
 Edwards, J. R., Jr.
 Maus, Paul

GARNER, 4th District
 Tally, William P.
 Woodard, Warden Lewis, Jr.

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Boyles, J. L.
 Current, A. C., Jr.
 Current, William A.
 Froneberger, H. D.
 Highsmith, Chauncey
 Houser, James B., III
 Lewis, James B.
 Lowry, Tolbert W.
 Moser, J. E.
 Moser, S. E.
 Quarles, William G.
 Rhyne, Howard S.
 Sherrill, L. T., Jr.
 Simpson, David H.
 Taylor, Kenneth, Jr.
 Walker, Woodrow W.
 Wilson, William D.
 Woody, M. E., Jr.
 Woody, W. L.

GIBSON, 4th District

Gardner, J. M.

GIBSONVILLE, 3rd District

Conrad, C. Richard

GOLDSBORO, 5th District

Boykin, Thomas C.
 Carnevale, Reynolds A.
 Cox, James L.
 Delbridge, Matthew G.
 Early, A. C.
 Ennis, Myron Hugh
 Houston, Ben H.
 Mallard, A. R.
 Overman, G. L.
 Poole, S. D.
 Tucker, W. W.
 Warren, E. R.
 Williams, R. E.
 Zealy, James M.

GRAHAM, 3rd District

Johnston, Ben M.
 Long, Herbert S.

GRANITE FALLS, 1st District

Icenhower, E. C.

GRANITE QUARRY, 2nd District

Sherman, Clarendon F.

GREENSBORO, 3rd District

Alspaugh, Laurence S.
 Atwater, Frank G.
 Bartis, Nicholas J.
 Brannan, B. M., Jr.
 Butler, H. Estes
 Butler, Luther H.
 Caldwell, J. B.

Caudle, James N.
 Corey, Calvin B., Jr.
 Coward, W. M.
 Crank, J. Cecil
 Ditto, W. M.
 Efird, Ira P.
 Farmer, Robert L.
 Finn, James C.
 Gay, S. P.
 Hall, Thomas A., Jr.
 Harned, Robert J.
 Henson, J. L.
 Holmes, C. Ray
 Howell, James B.
 Hunsucker, Hugh
 Hunter, M. Ray
 Johnson, A. H.
 Karesh, Harry A.
 Kilkelly, T. F.
 Kriegsman, Robert M.
 Landau, Lad, II
 Lasley, J. T.
 Lauten, J. J.
 Lipscomb, C. T.
 Lore, John R.
 Patterson, C. E.
 Poindexter, C. C.
 Poindexter, C. W.
 Pressly, W. A.
 Ralls, Marion L., Jr.
 Ray, A. Graham
 Rogers, Julian R.
 Saunders, W. L.
 Sessoms, W. W.
 Shaffer, S. W.
 Sheffield, Neal
 Sheffield, Neal, Jr.
 Sigmon, James W.
 Sikes, T. E.
 Sikes, T. Edgar, Jr.
 Solomon, Marshall H.
 Southworth, J. D.
 Stanford, A. R.
 Stokes, Thomas D., Jr.
 Stone, C. N. (Retired)
 Tannenbaum, A. Raymond
 Taylor, Clyde Leslie
 Teague, Charles H.
 Turner, James Lynwood
 Turner, Robert Lee
 Turner, R. S.
 Underwood, R. L.
 Whittington, P. B., Jr.
 Wolfe, Carl B.
 Young, W. Kenneth

GREENVILLE, 5th District

Aldridge, M. W.
 Clark, Badger Gill, Jr.
 Collie, Jay Mack
 Massey, M. B.
 Pearce, O. R., Jr.
 Ross, Ledyard E.
 Silvers, Jack E.
 Wright, Dan

GRIFTON, 5th District

Rasberry, William E.

GUILFORD COLLEGE, 3rd District

Butcher, Dale H.

HAMLET, 3rd District

Adams, Roy G.

Pearce, W. M.

Williamson, B. W., Jr.

HAVELOCK, 5th District

Gooding, Carnie C.

Stoddard, Alan L.

HAZELWOOD, 1st District

Kitts, Warren H.

Spurlin, Max Lewis

HENDERSON, 4th District

Allen, Howard L.

Finch, Walter H., Jr.

Hunt, Joseph T.

Hunter, Thomas M.

Kinlaw, John C.

HENDERSONVILLE, 1st District

Barber, L. B., Jr.

Buchanan, Francis A.

Carpenter, Joseph P.

Carpenter, W. W.

Clark, Alexander

Crowell, J. G.

Dolbee, Earl R., Jr.

Hargrove, W. F.

Holly, Norman J.

Pope, E. F.

Taylor, C. B.

Taylor, Omer W.

Winstead, J. L., Jr.

HENRIETTA, 1st District

Hamrick, T. Hicks, Jr.

HERTFORD, 5th District

Bonner, Allan B.

HICKORY, 1st District

Abernethy, David

Abernethy, G. Shuford

Bost, John Dewey

Brady, C. A., Jr.

Brown, C. Fred

Clayton, S. Fletcher

Davenport, H. V.

Fritz, C. B.

Fritz, John R.

Frye, D. G., Jr.

McDowell, William W.

Poovey, Auburn L.

Price, James L., Jr.

Williams, H. T.

Yelton, William D.

HIGHLANDS, 1st District

Moreland, Jessie Z.

HIGH POINT, 3rd District

Anderson, G. N.

Andrews, John L., Jr.

Bencini, E. A.

Campbell, John Kerr

Campbell, William R.

Cashion, Leonard R.

Dawson, I. C.

Edwards, Edgar E.

Gibson, Sam Bryce

Hart, Samuel T.

Hester, Elliott M.

Hinson, William P., Jr.

Horton, C. W.

Jarvis, William C.

Johnson, Numa C., Jr.

Kiser, Winford J.

McKaughan, W. R.

Megginson, L. P., Jr.

Surles, Charles W., Jr.

Zimmerman, L. H.

Zimmerman, L. R.

Zimmerman, T. R.

HILLSBORO, 3rd District

Moore, H. W.

HUDSON, 1st District

Hefner, Allen Ray

HUNTERSVILLE, 2nd District

Jurney, Henry C.

JACKSON, 5th District

Grant, L. C., Jr.

JACKSONVILLE, 5th District

Browning, Henry D., III

Demary, C. J.

Gaskins, R. Hogan, Jr.

Johnson, C. B.

Jones, William R.

Ketcham, William S.

Morgan, W. Kenneth

Reid, Thomas B., Jr.

Turner, L. R.

JAMESTOWN, 3rd District

Parks, Eldon H.

Pitts, D. R.

JONESVILLE, 2nd District

Miller, Fred C.

KANNAPOLIS, 2nd District

Alexander, George S.

Horne, George N.

Lipe, E. W.

Moon, Hewitt E.

Morgan, Eugene Brown

Parks, J. H.

Ridenhour, C. E.
Slaughter, Freeman C.
Troutman, M. L.

KERNERSVILLE, 2nd District

Griffin, Donald C.
Joyner, O. L.
Pegg, Fred N.
Southard, F. J.

KING, 2nd District

Booe, I. A.
Fowler, William F.
Helsabeck, W. J.

KINGS MOUNTAIN, 1st District

Baker, L. P.
Baker, Robert N.
Baker, Thomas P.
Hord, D. F., Jr.
Lewis, O. P.

KINSTON, 5th District

Beasley, Britton F.
Civils, H. F.
Dupree, Louis J., Jr.
Edwards, George L., Jr.
Gilbert, R. H.
Goldwasser, J. M.
Henson, Donald L.
Munsell, Paul
Rose, Junius H., Jr.
Sanders, Phil S.
Smith, Grover W.
Spear, Herbert

KNIGHTDALE, 4th District

Ransom, Rollin M., Jr.

LA GRANGE, 5th District

Morgan, Fabian

LANDIS, 2nd District

Kluttz, Robert F.

LAURINBURG, 4th District

Biddell, Alex J.
Biddell, F. H.
Johnson, Joseph M.

LAWNDALE, 1st District

Hord, Dwight B.

LEAKSVILLE, 3rd District

Blanchard, Manfred T.
Sugg, Charles H.

LENOIR, 1st District

Cook, Dennis S.
Forbes, M. M.
Graham, R. H.

Hagaman, Robert P.
Hedrick, Paul E.
Hedrick, Paul P.
Miller, W. J.
Reece, John F.
Shaw, Frederick C.
Yates, P. P.

LEXINGTON, 2nd District

Bingham, J. P.
Bingham, J. P., Jr.
Hood, J. Sidney
Hoover, Charles W.
Ratton, Thomas G.
Shoaf, R. R.
Smith, Amos H.
Sowers, Wade Andrew

LIBERTY, 3rd District

Neal, W. E.

LILLINGTON, 4th District

Marshbanks, B. P., Jr.
Pate, Grover C.

LINCOLNTON, 1st District

Bowman, James C.
Harrill, C. H.
Self, Fred L.
Self, Isaac R.
Self, I. R., Jr.
Steelman, S. H.
Warren, Ray Alexander

LITTLE SWITZERLAND

1st District

Howell, J. Spencer

LOUISBURG, 4th District

Eagles, R. L.
Pleasants, Marvin

LUMBERTON, 4th District

King, David D., Jr.
McKaughan, Gates
Moore, L. J., Jr.
Nantz, Glenn Rodney
Osborne, C. P., Jr.
Robinson, Ernest L., Jr.

MADISON, 3rd District

McAnally, C. W.
Webster, Frank T.

MAIDEN, 1st District

Kyles, C. Paul

MANTEO, 5th District

Edwards, Linus M., Jr.
Mustian, W. F.

MARION, 1st District

Dickson, B. A.
McCall, R. S.

Parker, C. A.
Rowe, O. D.

MARSHALL, 1st District

Bolinger, H. E.
Ramsey, Arthur M.

MARS HILL, 1st District

Sams, Roy B.

MARSHVILLE, 2nd District

Wilson, Charles R.

MAXTON, 4th District

Wicker, B. K.

MAYODAN, 3rd District

Ellis, William W.

MEBANE, 3rd District

Foust, James A., Jr.
Hook, Brevitt

MOCKSVILLE, 2nd District

Andrews, James E.
Andrews, Victor L., Jr.
Eckerd, E. A.

MONROE, 2nd District

Brooks, H. L.
Duncan, S. C.
Kistler, A. R.
McLeod, William H.
Price, William H.
Walters, Percy Frank
Wilson, F. M.

MOORESVILLE, 2nd District

Brawley, Boyce A.
Bridges, Worth T., Jr.
Gray, Robert C.
Sholar, Norman P.
Trivette, L. P.
Voils, C. U.

MOREHEAD CITY, 5th District

Eure, Darden J.
Freshwater, David H.
Hamilton, A. L., Jr.

MORGANTON, 1st District

Coffey, Ralph D.
Diercks, C. C.
Duncan, Allie H.
Falls, Ralph L.
Keels, Cameron H., Jr.
McBrayer, Gerald F.
Mazitis, Erika K.
Paisley, R. L.
Sain, H. T.
Winchester, P. W.

MOUNT AIRY, 2nd District

Ashby, John L.
Boyd, S. M.
Conduff, Duke P.
George, Robert A.
Hill, James C.
Moorefield, Paul
Oliver, Otis
Sutphin, Hugh E.
Thomas, Carl L.

MOUNT GILEAD, 3rd District

Harwood, Brooks W.

MOUNT HOLLY, 1st District

Hawkins, Bruce H.
Lucas, Walter J.
Moore, R. T.

MOUNT OLIVE, 5th District

Lee, James Higley
Wilkins, R. A.

MURFREESBORO, 5th District

Britt, W. F.
Vinson, Thomas W., Jr.

MURPHY, 1st District

Breland, Arthur B.
Dickey, Harry
Hill, J. N., Jr.

NASHVILLE, 5th District

Jackson, David S.

NEW BERN, 5th District

Barker, C. T.
Bratton, Lewis P.
Civils, Harvey W.
Gilbert, William B., Jr.
Hammond, W. L.
Hand, William L., Jr.
Johnson, Charles B.
Miller, Roy A., Jr.

NEWTON, 1st District

Adair, John T.
Barringer, M. R.
Cochran, James D., Jr.
Isenhower, Samuel H.

NORTH WILKESBORO

2nd District

Baldwin, Harry N.
Bentley, C. W.
Bentley, Keith L.
Casey, R. P.
Jones, Wm. F. (Retired)
Taylor, Robert G., Jr.
West, James B.
White, T. L.
Williams, Carolyn T.

NORWOOD, 3rd District

Trail, Julian S.

OLD FORT, 1st District

Snyder, J. M.

OXFORD, 4th District

Bryan, J. K.

Finch, S. J.

Martin, John Wayne

Pruitt, James F.

Sneed, Thomas Q., Jr.

PILOT MOUNTAIN, 2nd District

Agress, Bernard D.

Stone, I. F.

PINEHURST, 3rd District

Smith, John Watson, Jr.

PINK HILL, 5th District

Edwards, Henry A.

PITTSBORO, 3rd District

Hughes, John T.

Miska, M. G.

Williams, James Lowell

Wilson, Noah Rouse, Jr.

**PLEASANT GARDEN
3rd District**

Fields, Richard M.

PLYMOUTH, 5th District

Bennett, Carter T.

Johnson, W. H.

POINT HARBOR, 5th District

Nance, A. W. (Retired)

RAEFORD, 4th District

Jordan, J. F.

Smith, Marcus R.

RALEIGH, 4th District

Abernethy, C. E.

Attayek, Eli J.

Baker, E. D.

Beam, R. S.

Bell, Franklin D.

Bell, Victor E.

Bitler, Glenn F.

Bobbitt, S. L.

Branch, W. Howard

Broughton, E. H.

Byrd, Robert T.

Byrd, Thomas H., III

Chamblee, H. Royster

Collins, Thomas G.

Crawford, James A.

Dudney, George G.

Earp, Roy L.

Edwards, James H.

Fetzer, Thomas H.

Finch, Robert E.

Fitzgerald, Paul, Jr.

Gaines, Roy E.

Hale, G. Fred

Hargrove, Albert W.

Harris, Thomas H.

Hawkins, Charles Bruce

Herring, L. D.

Hunter, R. S.

Jackson, Don F.

Jackson, Ruth T.

Johnson, Kenneth L.

Kelley, Wesley E.

Kistler, Charles M.

Ledbetter, Charles B.

Lee, William Jackson

Ligon, J. H., Jr.

Lineberger, Henry O., Jr.

McAllister, J. Malcolm

McCaffity, Darwin W.

Marshall, W. Penn

Martin, William T.

Masters, David B.

Menius, J. A.

Morrison, R. R., Jr.

Morrison, Virgil McKee

Nelson, J. S. D.

Nelson, T. E., Jr.

Nicholson, M. P., Jr.

Oakley, Kenneth H., Jr.

Pearce, J. A.

Pearson, E. A., Jr.

Perry, T. Edwin

Phillips, A. A.

Rankin, W. W.

Roe, Jere E.

Seifert, D. W., Jr.

Smith, A. L., Jr.

Smith, Everett L.

Smith, Vonnie B.

Spencer, William R.

Sproul, James F.

Stanley, Lloyd B.

Stevens, C. W.

Swain, John P., Jr.

Swindell, James E.

Thompson, Sanford W., III

Towler, S. B.

Young, Thurman L.

Zaytoun, Henry S.

RAMSEUR, 3rd District

Graham, C. A.

RANDLEMAN, 3rd District

Chamberlain, Vander F.

Kistler, C. D.

RED SPRINGS, 4th District

McKay, S. R.

Stephenson, George W.

REIDSVILLE, 3rd District

Almond, C. Franklin
 Daniel, Robert Lee
 Moore, J. S.
 Moore, Walter H.
 Teague, Everette R.
 Wheless, J. R.

RICH SQUARE, 5th District

Brown, James William

ROANOKE RAPIDS, 5th District

Daniel, R. A., Jr.
 Daughtry, Curtiss W.
 Murphrey, W. E., Jr.
 Peck, Robert Brantley
 Ward, James A.

ROBBINS, 3rd District

Alexander, W. E.

ROBERSONVILLE, 5th District

Kilpatrick, J. M.

ROCKINGHAM, 3rd District

Haltiwanger, George A.
 Haltiwanger, William L., Jr.
 Nicholson, Robert A.
 Stubbs, J. M.

ROCKWELL, 2nd District

Holshouser, L. C.

ROCKY MOUNT, 5th District

Campbell, Walter E.
 Carson, J. Royal, Jr.
 Dowdy, John H.
 Eatman, C. D.
 Eatman, E. L.
 Fisher, Julian H.
 Fuerst, Herbert
 Godwin, Charles P.
 Hartness, John D.
 Hunt, Richard F., Jr.
 Minges, C. E.
 Minges, C. R.
 Smithson, T. W.
 White, Robert Dean
 Whitehead, A. P.
 Whitehurst, R. L.
 Young, H. L.

ROSEBORO, 4th District

Williams, Harry R.

ROWLAND, 4th District

Gibson, Jesse C.

ROXBORO, 3rd District

Bradsher, J. D.
 Chandler, Frederick M.

Hughes, Charles W.

Hughes, Jack H.

Long, Robert E.

Woody, F. Spencer

RURAL HALL, 2nd District

Helsabeck, C. Robert, Jr.
 Lamb, Lewis E., Jr.
 Ziglar, James Newton, Jr.

RUTHERFORDTON, 1st District

McBrayer, William F.
 McDaniel, W. J.

SAINT PAULS, 4th District

Cameron, Lawrence A.
 Moore, L. J.

SALISBURY, 2nd District

Blackman, W. W.
 Blackwell, Glen E.
 Buford, J. T. H.
 Chandler, F. H.
 Choate, E. C.
 Hinson, Wade A.
 Ketner, Bruce A.
 Kirk, F. W.
 Kirk, W. S.
 Large, Nelson D.
 Lomax, Bobby A.
 Spencer, John R.
 Taylor, W. C.
 Thurston, M. Stevenson
 Weant, Theodore F.
 Wharton, Richard G.
 Young, D. C., Jr.
 Zimmerman, John W., Jr.

SANFORD, 4th District

Barber, A. D.
 Byrd, Worth M.
 Cotter, Paul Eric
 Deibler, E. C.
 Harris, Franklin G.
 Hulin, James F.
 Lehmann, James H.
 Woltz, William Lee, Jr.

SCOTLAND NECK, 5th District

Lilley, M. M.

SHALLOTTE, 5th District

Holden, R. H.

SHELBY, 1st District

Burrus, Roy G., Jr.
 Edwards, A. C.
 Edwards, Byard F.
 Litton, Robert B.
 Murphy, Richard F.
 Noblitt, Perry M.

Plaster, Harold E.
Plaster, Hubert S.
Raymer, J. L.
Yelton, John L.

SILER CITY, 3rd District

Blair, Mott P.
Edwards, W. J.
Milliken, J. B.

SMITHFIELD, 4th District

Denning, John N.
Edrington, Charles E.
Lee, William G.
Massey, W. J., Jr.
Oliver, William H.
Sabiston, Charles B., Jr.
Whitehead, J. W.

SNOW HILL, 5th District

Wooten, George A.

SOUTHERN PINES, 3rd District

Anderson, George D.
Daniels, L. M.
Johnson, W. Harrell
Warlick, R. B.

SOUTHPORT, 5th District

Graham, C. Allen, Jr.

SPENCER, 2nd District

Howell, Albert E.
Snider, William H.

SPINDALE, 1st District

Whisnant, James F.

SPRAY, 3rd District

Bebber, James V.
O'Leary, Joseph A.

SPRING HOPE, 5th District

Inscoc, A. G.

SPRING LAKE, 4th District

Wallace, Mitchell W.

SPRUCE PINE, 1st District

Braswell, Jack Guy
Davenport, William
Peake, Dean Rigney
Woody, L. W.
Woody, L. W., Jr.

STANLEY, 1st District

McCall, Clyde N.

STAR, 3rd District

Hussey, T. E.

STATESVILLE, 2nd District

Cheek, Donald G.
Dearman, J. H.
Dorton, M. Lamar
Fowler, Harold D., Jr.
Gaither, Ferby Glen
Haddix, Guy E.
Holland, J. M.
Little, James E.
Long, Robert
Martin, Ernest L.
Montgomery, D. O.
Nicholson, J. H.
Rodgers, James F.
Williams, Joel Sherrod

SUMMERFIELD, 3rd District

Fox, Robert M.

SWANNANOVA, 1st District

Faucette, John W.

SWANSBORO, 5th District

Dupree, Lewis J.

SYLVA, 1st District

Bird, Charles W.
McGuire, Alice Patsy
McGuire, Daisy Z.
McGuire, Harold S.
McGuire, W. P.
Wilson, Noracella McGuire

TABOR CITY, 4th District

Cook, David E.

TARAWA TERRACE, 5th District

O'Berry, Walter S.

TARBORO, 5th District

Fleming, T. S.
Moore, R. W.
Weeks, H. E.

TAYLORSVILLE, 2nd District

Carter, George K.
Grant, Robert W.
Herman, Ralph E.

THOMASVILLE, 2nd District

Hodgin, O. R.
Holliday, R. H.
McGhee, James G.
Whicker, Thomas A.
Williams, Jabez H., Jr.

TROUTMAN, 2nd District

Webb, Gerald C.

TROY, 3rd District

Bland, Wilbur B.
Kornegay, Thomas A.

TRYON, 1st District

Derby, J. E.
McCall, C. W.
Mize, John T.
Thomas, George H.

VALDESE, 1st District

Parker, W. H.
Shell, John H.
Wehunt, Lloyd D.

WADESBORO, 3rd District

Bridger, R. L.
Mauldin, Joel Lee
Williamson, J. F.

WAKE FOREST, 4th District

Dickens, C. W.
Underwood, Nash H.

WALLACE, 5th District

Bland, A. B.
Bland, Donald E.
Johnson, B. McK.
Wells, DeLeon, Jr.
Zibelin, C. V.

WALNUT COVE, 2nd District

DeHart, V. L.

WARRENTON, 4th District

Jones, Rufus S.
Massey, S. H., Jr.
White, Walter A.

WARSAW, 5th District

Ausley, Mett B.
Kornegay, J. M.

WASHINGTON, 5th District

Duke, J. F.
Edwards, Zeno L.
Edwards, Zeno L., Jr.
Homes, Garland R.
Howdy, Frederick H.
Kidd, William E.
Trueblood, Samuel N.

WAYNESVILLE, 1st District

Medford, N. M.
Medford, Phil McR.
Ogden, Fred N., II

WEAVERVILLE, 1st District

Harris, Stanford

WELCOME, 2nd District

Butler, Wallace B.

WELDON, 5th District

Garriss, Marcus A.

WENDELL, 4th District

Blalock, C. A.
Horton, L. C.
Horton, R. L.

WEST JEFFERSON, 1st District

Jones, E. D.
Summey, Brett T.

WHITEVILLE, 4th District

Johnson, M. L.
Maultsby, William D.
Ward, E. Ben
Whitson, Ronald W.
Wooten, C. L.

WILLIAMSTON, 5th District

Gray, W. H.
Wright, E. K., Jr.

WILMINGTON, 5th District

Allen, Sidney V.
Barden, R. B.
Bellois, W. B.
Benson, E. S., Jr.
Broughton, J. O.
Fales, A. R.
Fraser, John E.
Furr, James E.
Harris, Archie L.
Hollis, Robert H.
Jewell, Edwin Smith
Keith, H. Leonidas, Jr.
Morgan, Bernard L.
Morrison, B. R.
Pigford, Guy E.
Russ, Bobby M.
Seitter, D. B., Jr.
Smith, James H.
Smith, Junius C.
Thomas, C. A.
Thompson, Horace K.
Weathersbee, Ramsey
Weathersbee, Ramsey, Jr.

WILSON, 5th District

Barnes, V. M.
Bissette, M. D.
Boseman, Dewey
Cooke, Charles S.
Etheridge, James E.
Hesmer, T. C., Jr.
Hooks, Oscar
Johnson, A. Dwight
Lee, Lewis W.
Linville, Walter S., Jr.
Tomlinson, R. L.
Turner, J. V.
Wall, Joe Thomas
Whitehurst, Raymond C., Jr.
Wilson, G. Curtis
Wooten, A. L.
Yelverton, Hugh

WINDSOR, 5th District
Lancaster, Charles G.

WINSTON-SALEM, 2nd District

Ausband, Samuel P.
Barkley, Carl A.
Beavers, D. L.
Beavers, Franklin C.
Bennett, Jack
Blackburn, Charles A.
Blair, Thomas L.
Blankenbeckler, J. D.
Boyles, Robert S.
Byerly, Robert T.
Christian, Bill J.
Clinard, Robert W.
Collins, Thomas R.
Cox, Vernon H.
Crotts, Hylton K.
Crow, William E.
Daniel, Frank H.
Duncan, N. J.
Farthing, J. Clopton
Fox, N. D.
Freund, O. J.
Hinkle, David R.
Hopkins, Edmund B.
Irvin, Emory Wayne
Jackson, Dwight A.
Jent, Herman C.
Levine, H. H.
Long, John S.
Lynch, William G.
Masten, Guy M.
Masten, R. E.
Meadows, Kenneth H.
Melvin, R. Philip
Mendenhall, F. C.
Moser, Kenneth B.

Nissen, Eva Carter
Phillips, Guy McD.
Reich, E. H.
Reid, Curtis S.
Riddle, William Frederick
Scherer, Richard F.
Secrest, W. A.
Smith, Thomas A.
Snyder, Kenneth Ray
Spillman, J. H.
Spoon, Riley E., Jr.
Stewart, Joseph D.
Strupe, James G.
Tomlinson, F. N.
Ware, William G., Jr.
Waynick, George E., Jr.
Waynick, I. M.
Weeks, W. P.
Westrick, Charles M.
Wilkinson, Robert M.
Williams, John R.
Yelton, W. F.
Yokeley, Gilbert W.
Yokeley, K. M.
Young, Douglas M.
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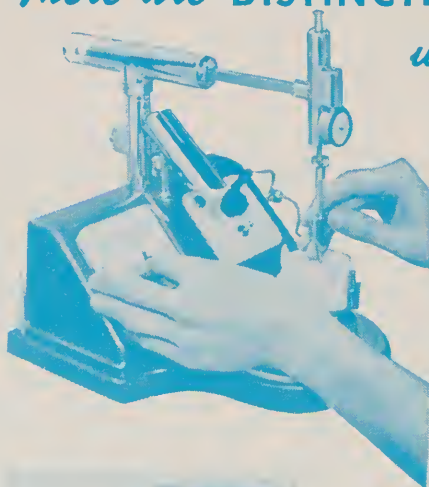


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This Issue Is Dedicated to . . .



**C. C. Diercks, D.D.S.
Morganton, North Carolina
Editor-Publisher 1959-1963**

No one knows about one's interest, sincerity, talent, enthusiasm, good will or dedication until samples are given in action. This Clint has done, and of these a part would be in each of us.

Clint's enthusiasm for continuously improving the North Carolina Dental JOURNAL has been an inspiration and challenge to all. Clint is a man of action. He has always demanded more from himself than from others. He is a man of ideas. His head has been in the clouds and his feet solidly on the ground.

It has been said, "a wise man's path winds upward to life." Over and upward we look, Clint, and we see not only your ascent but we become suddenly aware of the elevation to which you have carried the dental profession of North Carolina.



The President's Page



Just as regular as the years roll by, we continually remind you that another meeting is coming up that is different and well planned.

Dr. L. D. Herring, General Chairman, and his enthusiastic committee members have worked diligently, planning and developing a unique scientific program. Included is a wide selection of table clinics carefully chosen on diversified subjects. I refer you to the printed program in this issue for complete details.

"Take stock of thyself!" and you will find that it will cost you more to stay home than to attend this meeting.

Don't consider the length of time you have practiced your profession, or the years you anticipate you will continue to practice. The most brilliant cannot learn it all. There is always something to learn and take home with you that will be beneficial in your daily practice. It costs us to stand still. We cannot excuse ourselves by not knowing, nor allowing our minds to deteriorate. You must always be alert, keep abreast of the changing times, and know how to readily solve the difficult problems confronting your patients.

Ask yourself if you personally will not be better satisfied and your community a little better off by attending this meeting.

The practice of dentistry is something you must work at, live with, contribute to, and share in before the reward and satisfaction of the profession can be felt. When you return to your home with the knowledge that others will be more secure and happier because you attended your annual dental society meeting, then your North Carolina Dental Society membership will have true meaning.

Resolve that in the years to come you will work to be a better dentist, and participate in the activities of your local, district, and state society.

I hope you may afford my wife, Edythe, and me the opportunity of greeting you sometime during the May meeting. We cannot adequately express our warm feeling of friendship for the many courtesies shown us in the past five years while visiting with you at your district meetings, and in your homes. These visits will always be fond memories.

S. BYRON TOWLER, D.D.S.

THE

Journal

OF THE NORTH CAROLINA DENTAL SOCIETY

In the Present

The destiny of a profession, as with man, is never determined by chance. The choice this profession has made for each succeeding dedicated and able editor is self evident.

In the Past

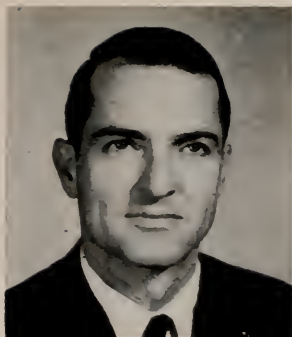
We solicit your interest and direction. In the membership of the North Carolina Dental Society is our opportunity.

In the Future

THE JOURNAL OF THE NORTH CAROLINA DENTAL SOCIETY is yours. Through you, the member and your District Editor, the contributions to the continued improvement of the dental health of the people of North Carolina will be made. Let us be positive that our efforts in daily practice are reflections of what we are saying. Contributions to the written word are there for posterity. Let us make it significant.

M. LAMAR DORTON, D.D.S.
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1963-1964

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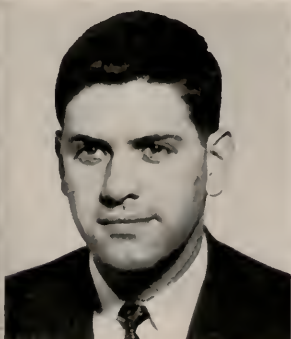
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DR. ALDRIDGE



DR. HAND

IN THIS ISSUE

MILES H. WOLFF, A.B., M.A. ("Dentists are people") is Executive Editor of the *Greensboro Daily News*. He was born in Dallas, North Carolina, is a graduate of Roanoke College, Salem, Virginia, and received a Masters Degree from the University of North Carolina. He began his newspaper career in Concord, North Carolina and was Managing Editor of the *Baltimore Evening Sun* before coming to Greensboro in 1949.

THOMAS G. NISBET, D.D.S. and S. H. EISENHOWER, D.D.S. ("Matastatic Sarcoma of the Mandible") both practice in their home towns. Dr. Nisbet graduated from Atlanta-Southern Dental College and practices Periodontia in Charlotte. Dr. Eisenhower was graduated from Emory University School of Dentistry and is in general practice in Newton.

M. W. ALDRIDGE, D.D.S. ("Gingival Repositioning as Applied to Mucogingival Surgery") was born in Craven County. He has practiced in Greenville, North Carolina since graduation from the Medical College of Virginia.

WILLIAM L. HAND, JR., D.D.S. ("Our Dental Future") of New Bern is a graduate of the Medical College of Virginia. He is currently President of the Fifth District Dental Society.

Dentists Are People!

*MILES H. WOLFF

DENTISTS are people, just like everybody else—almost.

I know of many who are delightful socially. I also know of many who are splendid professionally. But I don't know many who are leaders in civic affairs.

It's rather strange. Dentists as a group certainly are on a par with any other group from an educational standpoint. What is more, they certainly aren't candidates for help from President Johnson's cohorts in the attack on poverty. Their average income isn't far below other professions, if, indeed, it is below at all.

When I said earlier that dentists weren't leaders in civic affairs, I was putting it mildly. Actually, with few exceptions, dentists just don't participate.

I speak with some authority. I have been president of both the Chamber of Commerce and the United Fund in Greensboro. In both organizations, participation by den-

tists is noted chiefly by its absence.

Let's look at the record. Last year a total of \$895,683.20 was pledged for the United Fund in Greensboro. How much did the dentists contribute? The 72 dentists in Greensboro gave a total of \$3,669.84. This is an average contribution of \$50.97, slightly less than one dollar per week per dentist, about four packs of cigarettes, if any dentists still smoke.

In all fairness, I should report that ten of the 72 did not contribute at all. One dentist was listed in the \$200 or over category. The average of those who contributed was \$59.10.

The average gift of the medical doctors in Greensboro was \$110.98—nothing to brag about but certainly better than the dentists.

In commenting on the dentists' participation in the United Fund an official had this to say: "Dentists just don't do much. The doctors (meaning medical doctors) put

* Executive Editor of the *Greensboro Daily News*.

them to shame." He had one hopeful note: several of the young dentists had helped with the fund raising campaign last year, and he hoped more could be persuaded to join in next year.

(In using these figures for Greensboro I am not suggesting that this city is any worse than any other cities in the state. It just happens I have the figures at hand.)

What about the Chamber of Commerce? Eleven of the 72 dentists in Greensboro belong. Sixty-one aren't sufficiently interested to join. Isn't this a sad commentary? Sixty-one aren't interested in joining an organization dedicated to the betterment of the community, dedicated to making it a better place in which to live, dedicated to improving its business climate.

The strange part of all this is that the dental and medical professions are most vocal in opposition to "socialized medicine." They are most ardent supporters of free enterprise.

At the same time the civic organization most devoted to free enterprise and most opposed to socialism in any form is the Chamber of Commerce.

Yet only eleven of Greensboro's dentists associated themselves with this organization fighting the same battle they are fighting. A remarkable situation!

What are some of the reasons given for failure to join the Chamber of Commerce?

One is that the dentist doesn't have time. Many business men who work actively for the chamber are quite busy, too. But, assuming that the dentist really is too busy, what is to prevent him from supporting the chamber financially? That is the least he could do.

Then there is the argument that it isn't ethical. This is pretty silly. Even the American Medical Association approves membership in the chamber.

Another argument is that it costs too much. Such an argument coming from a low paid profession such as the teaching profession might be valid, but it just isn't true of dentists.

Do dentists know that each member of the United Automobile Workers Union pays \$90 a year in dues and assessments to his union? The range for minimum dues in most Chambers of Commerce is from \$20 to \$50 a year. This is cheap insurance for the future of your community and, incidentally, yourself.

Here's something else. The Internal Revenue Department has ruled that dues are tax deductible. The basis for this ruling is that the money is being used for the furtherance of the professional man's business.

Theodore Roosevelt once observed: "Every man is, first, a citizen of some community." Dentists are citizens. Are they interested in their communities? They should prove it.

Gingival Repositioning as Applied to Mucogingival Surgery

M. W. ALDRIDGE, D.D.S.

THE OBJECTIVE of the periodontal surgeon is not simply to eradicate the periodontal lesion but to create an environment to prevent further disease and maintain the integrity of the dentition. The only "cure" for periodontal disease remains the curette, but in advanced cases the creation of proper tissue and bony architecture through surgical means is necessary if the "cure" is to be of a relatively permanent nature. The unembellished gingivectomy more often than not is an inadequate means of attaining this end, hence the advent of mucogingival and osseous surgery. One such method encompassing certain advantages is discussed here.

The repositioning of a full mucoperiosteal flap as conceived by Nabers¹, and later modified and very precisely discussed and outlined by

Friedman², has proven to be a very useful and accurate surgical procedure in achieving the objectives of mucogingival surgery with a minimum of postoperative discomfort coupled with rapid healing. The "pushback" and "split flap" procedures previously used to obtain similar results left large areas of bone exposed postoperatively which gave rise to prolonged healing time, a great amount of postoperative pain, and frequently exuberant granulation tissue and bony sequestra.

The repositioning of the mucoperiosteal flap in an apical direction is an ideal surgical procedure, if used where indicated, and will afford the operator a method of eliminating many of the disadvantages of previous surgical methods. The repositioning procedure may be



Fig. 1



Fig. 2



Fig. 3

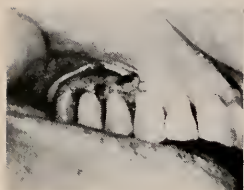


Fig. 4



Fig. 5



Fig. 6

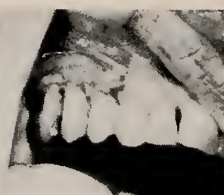


Fig. 7



Fig. 8

Fig. 1. Pre-operative view of area to be operated.

Fig. 2. Inverse bevel incision releasing mucoperiosteal flap.

Fig. 3. Area cleaned of gingiva and granulation tissue exposing bony craters.

Fig. 4. Bone contoured; interdental grooving established and bone levels made consistent in series of parabolic curves.

Fig. 5. Flap positioned apical to original position and sutured. Flap border covers buccal alveolar bone leaving only interdental bone exposed.

Fig. 6. One week: granulation tissue present in interdental spaces. A fresh pack was placed.

Fig. 7. Two weeks post-op: Almost complete epithelialization.

Fig. 8. Four weeks post-op. Healing is complete. There now exists an adequate zone of attached gingiva having proper physiologic form and interradicular contour.

used when the base of the pocket is at, or below the mucogingival junction and sufficient gingiva is left for repositioning. Should there not be sufficient gingiva originally, it then becomes necessary to resort to the "split flap" or similar procedures wherein bone is left exposed and a new zone of attached gingiva is allowed to regenerate.

Technique for Repositioning

The gingiva is thinned by an in-

cision which creates an inverse bevel from the gingival crest to the crestal bone. This eliminates the pocket epithelium and accompanying inflammatory or granulation tissue. This flap, including the periosteum, is raised, exposing buccal bone. Vertical incisions at either end of the flap may or may not be used depending on the situation and friability of the tissue, and the need for access to the operative area. The

remaining tissue around the necks of the teeth is then removed in conjunction with a lingual gingivectomy. After the necessary osseous surgery is accomplished, the entire flap is moved apically and sutured into position such that the margin of the flap just covers the alveolar crests.

It is important that the gingiva be beveled to the maximum to produce a thin margin, and that the flap be sutured precisely at the alveolar crest level. If vertical incisions are used they are sutured, as well as the interproximal areas.

The advantages of the repositioning flap are:

1. Minimal bone loss and sequestra because of maximum coverage by tissue.

2. Fast healing and less postoperative pain.

3. Unnecessary exposure of adjacent bone may be avoided when only a small area is involved.

4. A shallow vestibule may be precisely deepened by accurate positioning of the flap.

5. The frenum is moved with the flap and may be repositioned easily.

6. Absolute control of remaining attached gingiva such that a functionally adequate band is attained.

There has been much discussion as to what constitutes an adequate amount of attached gingiva. In the opinion of Friedman², "a functionally adequate amount of attached gingiva would be that amount suffi-

cient to prevent the free gingiva from being retracted from the tooth by a frenum or the alveolar mucosa. This is accomplished by an intervening band of attached gingiva of sufficient width to dissipate the pull from the contiguous muscles which is transmitted through the alveolar mucosa, or by a barrier of scar tissue that results from surgery at the mucogingival junction. An adequate amount of attached gingiva then, is not a matter of measurement in millimeters, but rather that amount which will perform the function of dissipating the pull from the muscles."

Summary

The repositioning of a mucoperiosteal flap which has been thinned by an inverse bevel incision is an innovation in mucogingival surgery which, when properly done, will minimize postoperative discomfort, decrease healing time and bone loss. The mucogingival junction, and vestibular fornix are all shifted apically and an adequate zone of attached gingiva is attained without the broad denudation of bone areas. The surgical procedure for the operation is outlined.

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Metastatic Sarcoma of the Mandible

THOMAS G. NISBET, D.D.S.

S. H. ISENHOWER, D.D.S.

SARCOMAS are tumors of non-epithelial (connective) tissue which may affect the bones, bladder, kidneys, liver, lungs, parotid glands and spleen. They rarely occur in the oral cavity, but when they do they are more often found within the bone than in the soft tissues and are usually highly malignant. Metastatic lesions can occur in the mouth since the mouth is very vascular and the metastasis occurs through the blood stream rather than through the lymphatics, although melanoma is an exception.

In contrast to carcinoma which is a tumor usually related to advancing age, sarcoma is apt to appear during the second and third decades of life and is highly malignant.

A 13 year old white boy was first seen November 23, 1960. He was

referred because of marked hypertrophy of gingival tissue in the lower left molar area. The soft tissue was highly vascular and poorly organized and bled readily on contact. A 3 m.m. diastema was present between the lower first and second molars on the left side which was the area of greatest proliferation. He was undergoing orthodontic treatment and wore bands from the six year molars mesially. There was a mild mobility in several teeth and a generalized gingivitis.

The X ray revealed a loss of normal bone pattern. There was bone resorption, and the remaining bone was diffuse and radiolucent. There was a loss of lamina dura. The teeth were vital. (See figures 1 and 2.)

His color was poor, and he had not felt well for a few weeks. He

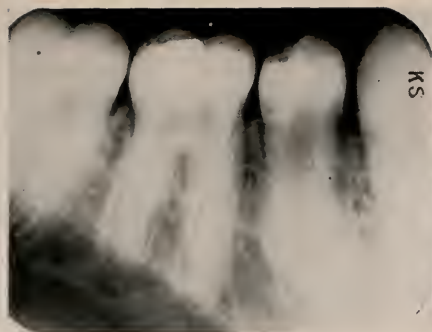


Figure 1



Figure 2

was under treatment for "flu" and intestinal parasites. He had had a low grade fever for several days.

A biopsy of this gingival tissue was done, and on his next appointment he was referred to an internist for a complete examination.

On November 28, 1960, the lower left first molar was removed due to extrusion and mobility for patient comfort. Profuse bleeding followed extraction and complete clotting did not occur until 48 hours later.

The report of the pathologist indicated a sarcoma, either reticulum, cell sarcoma or lymphosarcoma and probably metastatic. A large but non-tender node appeared on the left side of his neck. This was biopsied by a general surgeon, but there were no specific findings. On this exami-

nation for the surgery a large mass was noted in the abdomen. He was referred to a university hospital.

Within two days a second enlarged node appeared on the right side of the neck. These were treated with X ray and were reduced in size. The teeth tightened appreciably after the X-ray treatment.

The mass in the stomach was treated by nitrogen mustard therapy which reduced the mass as long as this treatment was tolerated and could be used. However, the patient began having pain in the extremities indicating a general septicemic involvement. Despite therapy, his clinical course gradually declined, and he died February 1, 1961.

324 DOCTORS BUILDING
CHARLOTTE

Tetracycline

and

Dental Enamel

Tetracycline, an antibiotic used to combat many types of infections, is now considered a major cause of enamel defects in children's teeth, according to Drs. Carl J. Witkop, Jr., Chief, and Robert O. Wolf, Human Genetics Branch, National Institute of Dental Research.

They report (*Journal of the American Medical Association*, September 28, 1963) that tetracycline can affect the secondary as well as primary teeth of children who have taken the drug while their teeth are developing. Affected teeth usually have yellow or brown discolorations, and in more serious cases, there is hypoplasia of enamel.

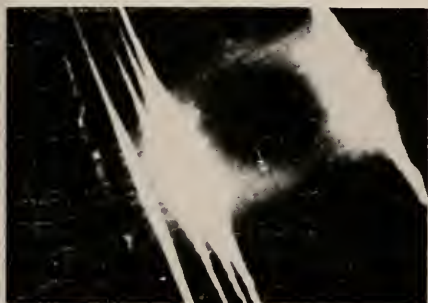
Prior to the wide use of tetracycline, enamel defects were seen only occasionally as a result of such hereditary or congenital anomalies as amelogenesis imperfecta, dentinogenesis imperfecta, hypoplasia of enamel secondary to erythroblastosis fetalis, or possibly severe febrile conditions during the stage of tooth formation.

Drs. Witkop and Wolf report seeing much larger numbers of children

with hypoplastic and stained enamel, which they traced to tetracycline given to a child in early infancy or to the mother during lactation. One investigator reported enamel discoloration in children who had had no tetracycline but whose mothers had received it in the last trimester of pregnancy. These defects were confined to those teeth and portions of teeth which were developing at the time the drug was given.

Direct relationship existed between the severity of the defect and

combines with the crystal, there is a reduction in amount of mineral and a decrease in crystal size. The relationship thus demonstrated between administration of tetracycline and decrease in the size of the crystals may be explained as a simple sequestering phenomenon, whereby the mineral available for crystal formation is withdrawn from the available pool. Dr. Bevelander believes that before this explanation can be accepted it will be necessary to ascertain whether binding of



Left: Photomicrograph of the root of a primary incisor from a child who had received several courses of tetracycline. Five fluorescent bands can be distinguished. (Photographed with ultraviolet light, x50.)



Right: Yellow-stained hypoplastic enamel in a 4½-year-old boy who received tetracycline when two weeks old. Lack of enamel on tips of cuspids resembles enamel notch seen in many children who have had erythroblastosis fetalis.

the amount of tetracycline administered. The tetracycline is incorporated into the calcifying dentin and enamel, producing a bright yellow fluorescence under ultraviolet light. Dr. Gerrit Bevelander of the University of Texas, working under a grant from NIDR, has reported (*Nature*, June 1963) that tetracycline combines with the protein membrane surrounding each crystal and the ground substance as well as the calcite crystal itself.

As the tetracycline fluorophore

tetracycline on the fibrous membrane surrounding the crystal is at least partly responsible for the reduction in crystal growth.

Since the enamel defects are often only cosmetically important, tetracycline should not be withheld when the consequences of infection outweigh the possible damage to the teeth. However, when other antibiotics are effective, they should be used in place of tetracycline in children whose teeth are in process of development.

*"As the twig is bent . . . " who
will your colleague of the
future be?*

*** Our Dental Future**

†W. L. HAND, JR., D.D.S.

IT MAY BE as surprising to you as it was to me, to learn that one out of every four applicants for dental school is accepted not because of ability and scholarship, but rather because of a lack of better qualified applicants.

Authoritative sources tell us that competition from the allied sciences is increasing in those areas that allow fringe benefits such as stock purchase options, group insurance plans, and retirement benefits as against the eight-year educational requirements and the relative high income bracket that future dentists must face.

Responsibility. Where does the responsibility lie?

With the expected increase in dental school enrollment, how will your colleagues of the future be selected, trained, and motivated toward professional maturity? If you and I maintain our present efforts, the percentage increase in dental students can come from only three sources: (1) those applicants desiring dental careers, but who possess below average prerequisites; (2) those rejected by the allied sciences; or (3) those motivated at the proper level of their educational ladder for dental careers.

The scope of dental education is invariably expanding to tax the number of teaching hours. Do we not expect the dental school to maintain and improve the standard of teaching, and to develop practitioners who are technically able, socially sensitive, and biologically oriented? How can our educators perform this task? By five-year dental schools? By working twenty-eight hours a day? Have not you and I failed our profession in supplying the type of student, in motivating the type of student most receptive, adept, and qualified for dental training? In my opinion, the caliber of prospective students can be and should be improved by one person. Who is this one person? Who is the dental profession? It is doctors like you and me. It is our responsibility to interest potential dental trainees at an early age to guide and counsel them in the paths they must follow to be accepted for dental education. It is our responsibility to be aware of the fact that if students are accepted in the range of mediocrity, then mediocrity is perpetrated in the profession.

For those that are aware, some definite mechanism is needed to give those interested and cognizant of the

* Presented at the 11th Annual District Officers' Conference of the North Carolina Dental Society, December 7-8, 1963.

† Chairman, Council on Dental Health and Information.

problem a way to carry through their initial motivation of a prospective dental trainee.

What information can we utilize?

What vehicle can we employ?

What type of prospective student should we select to guide and counsel along the educational ladder?

Specific information as to educational prerequisites for dental careers is available from national headquarters.

Specific information as to careers in dentistry is also available.

All accredited schools in the United States, their locations, addresses, and admission heads are listed by our national headquarters.

Motivational literature, film, and aptitude testing procedures are available upon request.

Guidance Counselors, Health Career Conferences, Career Days, and Science Fairs are all mediums of information and motivation.

How may these vehicles of information be utilized within the profession? May I suggest an over-all program of Careers in Dentistry, using as a nucleus of awareness and thought those dentists most cognizant of the problem and supply this group with complete information as to educational requirements, accredited schools and good motivational material.

It is my belief that the strength of our efforts lies in the interest and diligence of each of us. This is our challenge. This is our responsibility.

Agencies outside of the profession, yet within our sphere of influence, can be most helpful in the over-all program of Careers in Dentistry. Over 170 guidance counselors have been utilized in the past year to distribute some 12,000 pieces of motivational information to students

interested in dental careers.

Health Career Conferences are being held annually throughout the state. We owe a vote of appreciation to those who have participated in these exhibits and given their time and efforts toward interesting more youngsters in Careers in Dentistry. Could we not improve our scope of contact and cover all exhibits?

Science Fairs offer a good medium to stimulate interest in dentistry. Unfortunately, it has been this individual's experience that Science Fairs do more harm than good. For example: displays of orthodontic bands after removal, vulcanite dentures that the dentist doesn't mind letting some student take out of the office, haphazard information pamphlets. All of these I have seen at Science Fairs as representative of modern dentistry. If we do not improve our interest and attitude in guiding the dental projects of students, then we deserve the image vulcanite dentures create in the public eye.

Where does the responsibility lie?

If we are successful in these efforts, it is apparent that a group of interested and potential dentists would be available for a possible Career Day at Pinehurst with each phase of dental careers explained by the respective representatives, or a possible Career Day at the School of Dentistry.

These are the problems and some of the ramifications before us. The success or failure of any committee is directly dependent upon the many individuals that respond to the challenge and opportunity.

The challenge is here!

The opportunity will be available!

What will you do?

"I SEE DENTISTRY"

Here are the first two, of a series of twelve articles representing various facets of our profession which will be published in the next five issues of the JOURNAL. You are invited to drink deeply of them as they are but reflections of what the public sees.

From a dental student

I see dentistry as a profession with both opportunity and reward. It is a frontier with unlimited potentialities available to those who are members and future members of the profession. As all other professions, its foundation has been built by the endeavors of able people who have preceded us, but its perpetuation and advancement is dependent on those who are practicing today and those who will practice in the future.

Dentistry is a profession which can render a health service within the framework of the total health of the patient, and this rendering of a service is the essence and meaning which distinguishes it from a trade or business. Dentistry deals with the most complex of subjects, the human being, and the quality of the patient-dentist relationship is a peculiar, intimate, and particular type. The accomplishment of a successful practice of this relationship, on a continuing basis, calls for specific talents. The requirements are special training, special developments, special desires and motivations for this particular endeavor in life. The desire to be a dentist is a primary requisite. Furthermore, manual dexterity is most necessary, for dentistry requires an ability to coordinate the impulses of the mind to the hands. Therefore, dentistry cannot be accomplished by writing a prescription.

Dentistry is a profession that is

demanding as well as rewarding. Each patient requires separate and particular dental needs. We must be ever mindful to consider the individual as a whole rather than to consider each of his dental needs separately.

I see dentistry as a dynamic profession. Successful dental treatment can render a variety of desirable changes in patients. Dentistry has real power. Most practitioners do not realize the power they possess. Correction of dental problems can assist patients in becoming healthy, happy, and useful people. Prevention of psychologic trauma, the correction of speech impediments and other undesirable habits are a few of the variety of powers a dentist possesses. Personality changes, esthetic changes in appearance, and growth and developmental changes can be offered through proper dental treatment. These potentialities available to the dentist allow us to help people lead a pleasant and functioning life in our society.

In the practice of dentistry I have but two qualities to offer my patients, the best dental service I can perform, and to explain the services that dentistry has to offer, and what it can do for them. In return, the rewards from dentistry are many; these include both personal and material rewards. It is my belief that those who put the most into dentistry will

receive the most in return. I also expect to develop associations and friendship with others of similar interests and to continue those I already have. I believe that such pleasant associations can be most rewarding to a career. The most important reward of all is the personal satisfaction of providing a service that is done well.

Although advanced in many areas, dentistry still affords many opportunities for development and advancement. One of the most crucial areas for advancement is in the area of patient education and patient training. The general public still does not know enough about dentistry, and often what knowledge they do have is different from the real facts. The remark, "I just had not been told," is all too commonly heard when discussing the dental needs of a patient. Every dental patient should be afforded the opportunity for receiving the best dental treatment we can offer. Anything short of this is an unwarranted compromise. Too often our error is to assume that a patient cannot afford a

particular treatment, and we, therefore, revert to a treatment plan which is less than the best dentistry can offer. I believe we should eliminate such assumptions in our practice. Also I believe a patient should be referred to a competent practitioner when we feel that we cannot adequately treat the existing problems.

The people of our state and our country have granted us the privilege to practice dentistry, so it is up to the members of the profession to insure the continuation of our privilege by adequately preparing all patients with the necessary dental information and providing them with the best dental treatment. I feel that the time spent in patient education will be worthwhile, and will allow us to build a better image of dentistry in the eyes of the public. Through these endeavors I hope to be earning to live, and living to serve, in the profession of dentistry.

JOHN W. BRADSHAW
PRESIDENT, CLASS OF 1964
SCHOOL OF DENTISTRY

UNIVERSITY OF NORTH CAROLINA

From a dental laboratory owner

I see dentistry as a challenge for a young man that likes the work. Naturally, when I look at dentistry, I think of prosthetic work, having worked a lifetime in a dental laboratory.

My first memory (at about six years of age) is seeing my father bent over the chair pumping a foot engine. At that time he did all of his own laboratory work which consisted of vulcanite dentures, hand contoured two-piece crowns and a few bridges made with platinum pin facings which went through the fire.

He worked long hours as he had not yet heard of the forty hour week. Sometimes he labored way into the night, six days a week.

Then, at the ripe age of fourteen I began my career as an errand boy for a dental laboratory in Youngstown, Ohio, population 185,000. We were the best laboratory in town, in fact the only laboratory in town. Fifty per cent of the dentists were still doing their own work. We made vulcanite dentures, gold crowns and fixed bridgework. Partial dentures

were made with bent wire gold clasps and hand contoured lingual bars.

I take a look at the past believing this helps to better assess the future. The dental laboratory industry has advanced very rapidly in the past 25 years but is now in desperate need of identification. Some way has to be found to identify the industry and the technician as part of the dental profession.

Today, new technics and materials are being developed constantly which keep a man learning and adjusting all the time. To stay even with progress this is a must today. Plastics are being developed which may make some metals obsolete in the dental laboratory before very long. This constant progress of technics, materials and growth keep a man's mind and spirit young. Learning and keeping up with the fast pace is a challenge.

It has been estimated that ninety-five per cent of the dentists today send all their work to a commercial laboratory. With the population growth and the senior citizens living longer, there may be more and more prosthetic work sent to the laboratories by the dental profession.

The leaders in the laboratory industry are searching today for some recognition and status, not necessarily more money. Whether it means legislation, accreditation, certification, registration or what not, they would like some part in the administration of it. I would be the first to admit that we have made mistakes in some of our efforts to obtain this goal, but they were honest mistakes.

Contrary to what some think, it is to our advantage to see the dentist prosper and the patients well satis-

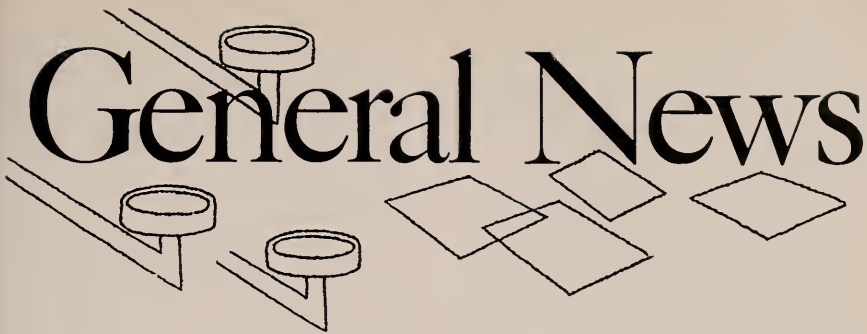
fied. Our livelihood depends on it. We cannot exist without repeat business. Most of us have spent endless hours trying to perfect new technics and spent large sums on special equipment which is no longer used and has been cast aside in the relentless march of progress.

Today the laboratory industry stands ready and willing to serve the dental profession. We are the child (or sometimes we think, the step-child) of dentistry. We want to be a part of the growing family but would also like to sit in on the family council, especially when the decisions affect our lives, families, business and our employees.

Too many groups and organizations, other than the laboratory owners have been and are continuously regulating and completely setting the standards by which a dental laboratory can operate. This is a bad situation, if for no other reason than from a business standpoint. What business man wants someone else to make the rules and standards by which he is to operate his business, especially when they are his customers. The majority of laboratory owners have spent a lifetime in dental technology and their business represents a large sum of money and many years of true devotion to the dental profession. Therefore, I think it quite natural for the dental laboratory businessman to want and strive for a voice in the operation of his business.

I am not speaking for any group or association, these are my own humble conclusions. Dear reader, if you have stayed with me, I thank you. This is briefly the way "I see dentistry."

D. H. EVANS
GREENSBORO

An illustration at the top of the page depicts a typewriter on the left and several sheets of paper scattered on the right. The typewriter is shown in a simple, line-art style. The papers are rectangular and some are overlapping, suggesting a workspace or a desk.

General News

Georgia Motion Denied

U. S. District Judge Frank A. Hooper has denied a motion by the Georgia Dental Association to dismiss a suit by Atlanta Negro dentist R. C. Bell in which he alleged he was barred from membership because of race.

Judge Hooper noted in his ruling, however, that: "Except for the acts of the Georgia legislature," which require that appointments to the State Board of Dental Examiners, the State Board of Health, and the Hospital Advisory Council be made from nominees submitted by the Dental Association . . . "the Georgia Dental Association and the Northern District Dental Society would have the undoubted right to admit only such persons as they desired and could, without violating any law, exclude Negroes from membership."

"The Georgia Legislature . . . by giving to the Dental Association the right to nominate members of the three state agencies above referred to, made it an agency of the State of Georgia," he declared.

This denies Negro dentists equal protection of the laws because they are thereby deprived of the right to vote on the members of the association who, as board members, set up

rules under which they practice and pass on licensing of dentists.

Judge Hooper originally signed an order January 21 denying the Dental Association's motion to dismiss the suit. At the request of the Association, and with the concurrence of the plaintiffs, he later voided that order and issued another, with the same conclusions, but specifying that it could be appealed to the Fifth Circuit on interlocutory appeal.

The suit by Dr. Bell against the Georgia Dental Association is similar to that filed by Dr. R. A. Hawkins, Negro dentist of Charlotte, against the North Carolina Dental Society in March 1960. Dr. Hawkins also contended he was being denied membership because of race. The complaint was heard before Judge Wilson Warlick in Charlotte last September. During the two-day trial, attorneys for the North Carolina Dental Society presented evidence to prove that the Society exercises no governmental function, state or federal, and that membership in it is not required as a prerequisite for securing of a license to practice dentistry or for the practice of dentistry in North Carolina.

A decision is expected in the Spring of 1964.

Classified Ad Section To Be Added

Do you have equipment for sale? Office space to rent? Looking for an associate?

Effective with the August 1964 issue of THE JOURNAL a new service will be offered to the membership.

A classified advertising section will be added to the publication. The rate will be \$3.00 for 30 words or less, and 5c for each additional word. The deadline for accepting ads will be the first of the month preceding the month of publication. Remittance must accompany your order. Insertion orders should be sent to: THE JOURNAL OF THE NORTH CAROLINA DENTAL SOCIETY, P. O. Box 11065, Raleigh, N. C. 27604

Career Day at U.N.C.

A Career Day for prospective dental students will be held at the University of North Carolina School of Dentistry, Saturday, April 25, sponsored by The Council on Dental Health and Information, in cooperation with the dental school.

Dr. R. J. Shankle of the dental faculty said that participants in the Career Day will be given an opportunity to observe the clinics, classrooms, and laboratories in operation during a conducted tour. After the tour, consultation, and question and answer periods will be held.

High school juniors and seniors and junior college students from all parts of the state who are interested in a career in dentistry have been invited to attend. Opportunities as a dentist, oral hygienist, dental assistant, or a dental laboratory technician will be outlined.

Dr. W. L. Hand, Jr., Chairman of

the Council on Dental Health and Information, stressed that the program was planned to interest qualified young people in a career as a member of the dental team.

Dr. Miller Selected

Dr. Barry G. Miller, Editor-Publisher of THE JOURNAL OF THE NORTH CAROLINA DENTAL SOCIETY is one of 25 constituent society editors selected by the A.D.A. Council on Journalism to attend a four-day Dental Editors Workshop at Ohio State University in Columbus, Ohio, June 14-18, 1964.

The Workshop is being conducted through a grant from the National Institute of Health to improve dental communication by improving the writing ability of journal editors.

N. C. Must Implement Kerr-Mills

Attorney General Wade Bruton ruled on February 26 that the State Board of Public Welfare must implement the Kerr-Mills plan of medical care for indigent Tar Heels over age 65.

Legislation enacted by the 1963 General Assembly calls for establishment of a separate program rather than extension of present coverage, Bruton said. In January the Welfare Board voted merely to extend the welfare program to cover the eligible recipients, rather than adopt the full provisions of the federal Kerr-Mills Act. Board Chairman Howard E. Manning argued that the legislation gave the Welfare Board the option of setting up a new program or simply extending coverage within existing welfare framework. Further, he said, the creation of a new program

would be too costly.

However, Bruton ruled that:

"It was the intent of the General Assembly that the State Board of Public Welfare set up a separate medical assistance program for the aged in accordance with the Kerr-Mills provision of the federal act to provide services (including dental) authorized under Senate Bills 8 and 423 for medically indigent persons over 65 who are not recipients of old age assistance.

"It does not appear that it was the legislative intent that the (board) have the option to extend the provisions of the present 'no-money payment' hospitalization program to include these medical services . . ."

Health Fair Scheduled

The North Carolina Health Fair, sponsored by the Durham-Orange County Medical Foundation, will be held in Duke Indoor Stadium in Durham, April 1-4. Over 50,000 children and adults are expected to attend the four-day event.

The purpose is to inform young North Carolinians about health careers, to provide school teachers, vocational counselors, principals, and parents with the latest information on health careers and medical science, and to stimulate public understanding of progress and achievement in medical science and health care.

Dentistry will be represented by three exhibits: two by the Durham-Orange County Dental Society and one by the North Carolina Dental Society. Other exhibitors include the American Medical Association, the National Health Council, the Atomic Energy Commission, the National Aeronautics and Space Administration, the U. S. Department of Health,

Education and Welfare, the North Carolina State Board of Health, professional and scientific societies and voluntary health agencies.

Dentists File for Senate Seats

Two dentists will seek the Democratic nominations for state senate seats in the May 30 primary.

Dr. Dennis S. Cook, who has served twice in the General Assembly, is a candidate for Senator from the new Burke-Caldwell district (32nd).

Dr. W. T. Ralph of Belhaven has filed his candidacy for Senator from the second district composed of Beaufort, Dare, Hyde, Tyrell, and Washington counties.

In two prior terms Dr. Cook represented the old 28th district composed of Burke, Caldwell, and Alexander counties. The 1963 re-districting created a new two-county district, with Alexander being transferred to another.

A Caldwell County native, Dr. Cook, for eight years, was a member of the Lenoir City Council and served as mayor pro-tem. He was first elected to the Senate in 1954 and served in the 1955 session of the legislature and in the special session in 1956. He was elected again in 1960 and served in the 1961 session. He is currently Secretary-Treasurer of the North Carolina Dental Society, and is a past president of the First District Dental Society.

Dr. Ralph was mayor of Belhaven for 14 years, served on the Beaufort County Board of Education 12 years, and is a past president of the Fifth District Dental Society.

Both candidates will face opposition. Dr. Ralph is seeking the seat held in the 1963 General Assembly

by P. D. Midgett, who has announced he will run again. Ashley B. Futrell, publisher of the *Washington Daily News*, has indicated he might enter the race.

Attorney Claude Seila of Lenoir will oppose Dr. Cook in the 52nd district race.

Dr. Hooper Elected

Dr. Glenn Hooper of Dunn has been elected to the three-member executive committee of the North Carolina State Board of Health. Announcement of the election was made by the Board's public relations office in January.

Dr. Hooper has served as the dental member of the State Board of Health since his appointment to the body by Governor Sanford in September 1961. There are nine members of the Board.

The other two members of the executive committee are Dr. Lennox Baker of Duke University Medical Center and Dr. Ben W. Dawsey of Gastonia.

Dr. Hooper is a former president of the Harnett County Medical Society, a former secretary-treasurer and president of the Fourth District Dental Society. He served as chairman of the Ethics Committee of the North Carolina Dental Society from 1957 to 1962.

A native of Winston-Salem, he has practiced in Dunn for 29 years.

Dr. Marks at Howard

Dr. Sandy C. Marks is serving for one year as assistant professor of Pedodontics at Howard University College of Dentistry. He assumed the post last June after receiving his M.S. degree in Pedodontics at U.N.C. School of Dentistry.

New Dental Assistant Program

A training program for dental assistants at Wayne Technical Institute in Goldsboro began last fall with a class of 12. This spring a second class was started, since, after two quarters, the students spend their next two quarters doing clinical work primarily.

Dr. Charles B. Sabiston, Jr., of Smithfield is the department head. He is assisted by Dr. W. M. Heeden, Jr., of Benson, and two dental assistants.

The first class will be graduated at the end of the summer quarter in 1964.

The Institute also is offering its first evening program of instruction for upgrading dental assistants already employed in the area.

Classes are limited to 12 so as to afford more individual attention to each student than normally found in classroom situations, according to Associate Director W. Travis Martin.

National Study of X-Ray Exposure

Luther L. Terry, surgeon general of the U. S. Public Health Service announced February 12, a national study to provide estimates of population exposure from various types of X-ray examinations and procedures.

The Surgeon General noted that long-range efforts are being made by medical and dental organizations and public health agencies throughout the country toward elimination of unnecessary radiation exposure from the healing arts without loss of the diagnostic or therapeutic benefits which X-rays provide.

Dr. Terry said that a number of

efforts have been made in the past to obtain information about X-ray exposure in this country. These studies have been limited to selected populations or to certain types of examinations. The current study will be comparable in scope to the comprehensive studies made in other countries, including Great Britain.

The study will be the second in a series conducted jointly by the Division of Radiological Health and the National Health Survey of the Public Health Service. A report on the first study covering X-ray visits from July 1960-June 1961 was published by the National Health Survey in October 1962.

Dental Care in Nursing Homes

New standards and regulations governing the administration and licensing of nursing homes in North Carolina, established in January by the N. C. State Board of Health, include specific provisions for dental care of patients.

A dental examination for all patients admitted is now required, to include the following information: (1) Type of diet which the patient can best manage (normal or soft); (2) The presence of infection of gums, teeth, or jaws; (3) Brief descriptions of any removable dental appliances, and a statement as to whether or not they are satisfactory; (4) Indications for dental treatment at the time of admission.

A list of dentists who are able to render emergency and other necessary dental treatments must be maintained by all nursing homes. All medicines, poisons, and other drugs, except domestic remedies, must be obtained only on the prescription of

a physician or dentist.

Nursing homes are now required to encourage oral hygiene for all patients. Recommendations include that: (1) Daily dental care be given to each patient as necessary for general health; (2) Each patient possess one or more toothbrushes in good condition, suitable for cleaning natural or artificial teeth. The patient should be encouraged in the use of the toothbrush after each meal, with both natural teeth and artificial appliances being thoroughly cleaned; (3) Each patient having an artificial denture is furnished a receptacle in which to immerse the denture overnight in water or denture cleaning solution.

Dr. Jere Roe of Raleigh is the dental member of the Nursing Home Advisory Council, a ten-member group created by the 1961 General Assembly when licensing of nursing homes was transferred from the Medical Care Commission to the Board of Health.

Course Set for Dental Assistants

A three-month course for women interested in becoming dental assistants will be offered this summer at the University of North Carolina.

There will be no tuition or laboratory fees charged the 20 women selected for the course to be given at the UNC School of Dentistry June 4 through August 21.

Total expenses for the summer course should not exceed \$400.

The Fifth District Dental Auxiliary is offering a \$300 scholarship to an Eastern North Carolina resident selected for the course. Mrs. R. E. Williams of Goldsboro is chairman

of the district's scholarship committee.

At the end of the summer, all students successfully completing the course will receive certificates from the UNC Extension Division.

I.R.S. Rules Block Professional Corporations

The Internal Revenue Service has dealt a body blow to physicians, dentists, and other professional men planning to incorporate for tax purposes, according to the *American Medical Association News* in its January 20 issue.

A proposed regulation states that such professional organizations must have the characteristics of a business corporation in order to qualify for corporation tax treatment which, authorities say, would be virtually impossible for a group of professional men.

The new rules proposed by I.R.S., said an A.M.A. attorney, neutralize the professional corporation and association laws enacted by many states.

A strong protest against the new rules was made by the American Dental Association and other professional groups at a hearing in Washington March 4-6. Representatives of the A.D.A. asked that the proposed regulations be amended to represent a realistic and fair effort to give equal treatment for federal tax purposes to professional practice organizations properly formed under statutes or other state-recognized standards approved by either the legislatures or the courts of the several states.

5th District Seminar

Seventy dentists and 75 dental staff workers attended the seminar in Kinston February 21, sponsored by the Fifth District Dental Society.

Dr. Lewis J. Marchand, Gainesville, Florida was the clinician for the all-day event. His presentation was "Oral Diagnosis and Treatment Planning."

In attendance were dentists from various communities and towns throughout eastern North Carolina as well as dentists from outside the Fifth District area, including Raleigh, Greensboro, and Chapel Hill.

Obituaries

Dr. Arthur H. Johnson, 81, of Greensboro, a life member of the Third District Dental Society, the North Carolina Dental Society, and the American Dental Association, died January 7, 1964.

Dr. Graham McLean, 70, of Lumberton, a member of the Fourth District Dental Society until his retirement from practice in 1961 because of ill health, died February 29, 1964.

Dr. Lee Roy Zimmerman, 58, of High Point, a member of the Third District Dental Society, died January 29, 1964.

The New Enlarged Program of

DISABILITY INSURANCE

EFFECTIVE ON JUNE 22, 1963 RENEWAL OUR PRESENT LOWER PREMIUM RATES FOR UNDER AGE 35 WILL BE EXTENDED TO INCLUDE MEMBERS UNDER AGE 40. PLEASE NOTE QUOTATIONS BELOW.

PLANS UP TO

- \$250.00 WEEKLY DISABILITY INCOME BENEFITS (\$1,080.00 monthly)
- \$20.00 PER DAY EXTRA HOSPITAL BENEFIT, AND UP TO \$225.00 SURGICAL BENEFITS FOR MEMBER AND DEPENDENTS (Optional)

PLAN A (Basic)

Lifetime Accident and 7 Years Sickness

Weekly Benefits	Dismemberment Benefits	Principal Sum For Accidental Death	SEMI-ANNUAL PREMIUMS	
			Premium Age 40 and over	†Reduced Premium To Age 40
\$250.00	Up to \$50,000.00	\$5,000.00	\$244.50	\$183.50
\$200.00	Up to \$40,000.00	\$5,000.00	\$196.50	\$147.50
\$150.00	Up to \$30,000.00	\$5,000.00	\$148.50	\$111.50
\$100.00	Up to \$20,000.00	\$5,000.00	\$100.50	\$ 75.50

PLAN AA (Long Term)

Lifetime Accident and For Sickness, from Inception of Disability To Your Attainment of Age 65

Weekly Benefits	Dismemberment Benefits	Principal Sum For Accidental Death	SEMI-ANNUAL PREMIUMS	
			Premium Age 40 and over	†Reduced Premium To Age 40
\$250.00	Up to \$50,000.00	\$5,000.00	\$292.00	\$219.25
\$200.00	Up to \$40,000.00	\$5,000.00	\$234.50	\$176.00
\$150.00	Up to \$30,000.00	\$5,000.00	\$177.00	\$133.00
\$100.00	Up to \$20,000.00	\$5,000.00	\$119.50	\$ 89.75

The premiums for Plan AA will be reduced to the same premium as for Plan A at age 58.

Note: The above rates do not increase at age 50 or even at age 60!

†On attaining age 40, age 40 rates apply on renewal.

J. L. CRUMPTON, State Mgr.

Professional Group Disability Division

COMMERCIAL INSURANCE COMPANY OF NEWARK, N. J.

Box 147, Durham, N. C.

J. Slade Crumpton, Field Representative

If more information is needed or help desired in completing your enrollment please call us collect:

Area Code 919—Phone 682-5497

Walker-Sizer Dental Company

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TEEN-AGE NUTRITION

Protein? They couldn't care less!

The adolescent years are nutritionally vulnerable years when food selection is subject to teen-age whims. Total protein requirements reach unprecedented heights. Therefore, a good source of high quality protein is essential for the formation of protein-rich tissues.

The adolescent years are years of accelerated growth and activity. They are nutritionally vulnerable years when all nutritional needs are greatly increased and when food selection is subject to teen-age whims and fancies. Total protein requirements reach unprecedented heights as an abundance of protein-rich muscle, blood and other tissues must be formed in synchrony with the adolescent spurt in skeletal growth and sexual maturation.

The teen-ager is not blessed with an inherent or acquired capacity to store essential amino acids against the time when they

may be in short supply. Animal studies indicate that a substandard intake of any one essential amino acid may serve as a limiting factor in the utilization of all. To assure maximal growth and efficient tissue production, the teen-age daily diet should contain adequate amounts of all essential amino acids along with sufficient calories and other essential nutrients. The optimal daily protein requirement during adolescence has been estimated at 15 percent of the caloric needs of the individual.

As a prime source of readily available high quality protein, calcium and phosphorus, milk is particularly well endowed to help meet the unique nutritional demands of adolescence. When included as an integral part of a well-balanced varied diet, one quart of milk per day—or its equivalent in other dairy products—provides from 33 to 50 percent of teen-age protein requirements.

NORTH CAROLINA DAIRY COUNCILS

2602 Hillboro Rd
DURHAM

106 E. Northwood St
GREENSBORO

610 Coliseum Drive
WINSTON-SALEM



THE CAROLINA
PINEHURST, N. C.
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TOO—YOU ARE ALWAYS WELCOME**

**FOR TOURIST, AND TRAVELER ON
VACATION — IT'S ALWAYS GOLF-TIME
IN PINEHURST**

**IDEALLY SITUATED IN THE PINE COUNTRY
OF THE CAROLINA SANDHILLS**

**DANIEL O. DELANY, MANAGER
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*Preliminary
Program*



**108th
Annual Session**

North Carolina Dental Society

May 10, 11, 12, 13, 1964

THE CAROLINA

PINEHURST



108TH ANNUAL SESSION COMMITTEE

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L. D. Herring

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Marcus R. Smith, Horace P.
Reeves, Jr., C. Robert Vander-
Voort, Colin P. Osborne, Jr.,
W. Howard Branch.

Monitor

Worth M. Byrd, Chairman;
Franklin G. Harris, Co-Chairman;

David H. Freshwater, William E.
Kidd, G. Curtis Wilson, James A.
Leggette, Jr., Lewis W. Lee,
James F. Hulin, Walter T. Mc-
Fall, Jr., James H. Lehmann,
Frank H. Daniel, Robert H. Gainey,
J. Malcolm McAllister, William C.
Keith, William G. Ware, Jr., Don-
ald E. Bland, Edward N. Pridgen,
Neal Sheffield, Jr., Junius H.
Rose, Jr., Robert A. Yates.

Necrology

Robert A. George, Chairman;
J. Ernest Roberts, Dewey Boseman,
Marcus R. Smith, W. T. Pennell.

Projected Clinics

Fred N. Ogden, II.

Publicity

T. Edgar Sikes, Jr., Chairman;
Walter H. Davis, W. Stewart Peery,
J. Henry Ligon, Jr., Charles T.
Barker.

Sports

R. Bruce Warlick, Chairman;
Marvin R. Evans, Thomas H.
Byrd, Jr.

Visual Education

John T. Hughes, Chairman; San-
ford W. Thompson, III, C. E. Cran-
dell.



OFFICERS
NORTH CAROLINA DENTAL SOCIETY
1963-1964

S. Byron Towler, D.D.S., Raleigh.....	President
Darden J. Eure, D.D.S., Morehead City.....	President-Elect
Barry G. Miller, D.D.S., Charlotte.....	Vice President
Dennis S. Cook, D.D.S., Lenoir.....	Secretary-Treasurer
Barry G. Miller, D.D.S., Charlotte.....	Editor-Publisher
M. Lamar Dorton, D.D.S., Statesville.....	Associate Editor-Publisher
Andrew M. Cunningham, B.S., Raleigh.....	Executive Secretary

General Information

Registration: The registration desk will open at 11:00 a.m., Sunday, May 10, in the Foyer of The Carolina. Members must present their 1964 membership cards.

General Sessions: Three General Sessions will be held in the Ballroom: Sunday at 8:30 p.m., Monday at 8:30 p.m., and Wednesday at 11:30 a.m. Everyone is cordially invited to attend the General Sessions Sunday evening and Wednesday morning. Officers will be elected at the General Session Monday night and only members will be admitted.

House of Delegates: Three meetings of the House of Delegates will be held in the Bridge Room: Sunday at 2:00 p.m., Tuesday at 9:00 a.m., and Wednesday at 10:00 a.m. Delegates only will be admitted to the floor of the House, but a gallery will be provided for visitors.

Reference Committees: All members are privileged to attend Reference Committee hearings and participate in the discussion. Announcement of appointments to Reference Committees and reports and resolutions referred to them will be made by the Speaker at the opening session of the House of Delegates on Sunday at 2:00 p.m.

Reference Committees will meet on Monday, May 11, on the following schedule:

Reference Committee A	9:00 a.m. Pine Room
Reference Committee B	10:30 a.m. Pine Room
Reference Committee C	9:00 a.m. Bridge Room
Reference Committee D	10:30 a.m. Bridge Room
Constitution and Bylaws Committee	3:30 p.m. Bridge Room
Ethics Committee	2:00 p.m. Bridge Room
President's Address	2:00 p.m. Pine Room

Commercial Exhibits: Commercial exhibits by dental manufacturers, dealers and dental laboratories will be on the West Porches. Each will be represented by competent and well-qualified representatives. They can be a very helpful source of information on the latest in dental equipment and services. The commercial exhibit area will be open on Sunday from 1:00 p.m. to 5:00 p.m., and on Monday and Tuesday from 9:00 a.m. to 5:00 p.m.

Sports: Five sports events are scheduled for Sunday, May 10.

A Golf Tournament, scored on the Calloway System, will be held on the Pinehurst Country Club courses. Teeing-off time begins at 8:00 a.m. and no entries will be allowed after 1:00 p.m. Scores must be turned in by 6:00 p.m.

Tennis Matches with singles and mixed doubles will begin at 1:00 p.m. on the Pinehurst Country Club Courts.

A Bowling Tournament will start at 1:00 p.m. on 10 AMF lanes at OK Lanes in Southern Pines. Three games will be rolled to establish handicaps.

A Fishing Contest will be held at three ponds owned by The Carolina—Upper and Lower Monroe Ponds and Otter Pond. All ponds are about two miles from the hotel. For directions, ask the doorman.

A Skeet Shoot at the Pinehurst Gun Club will begin at 1:00 p.m.

An entrance fee of 75¢ will be charged for each event.

Entertainment: Members and their guests are cordially invited to attend the following social events at The Carolina:

An informal social hour on the front lawn Monday, 5:30 p.m.

The Annual Banquet in the Dining Room, Tuesday, 7:00 p.m.

The remarkable talents of Shearen Elebash in the Ballroom, Tuesday, 8:30 p.m.

A dance with Dr. Clyde Young and his "Music Makers" in the Ballroom, Tuesday, 10:00 p.m.

Scientific Exhibits: Several scientific exhibits will be on display in the Cocktail Lounge and adjoining areas during the entire meeting, beginning at 1:00 p.m. Sunday.

District Officers' Conference Breakfast: All members of the District Officers' Conference are urged to meet for breakfast in the Crystal Room at 7:30 a.m. on Monday.

Past Presidents' Breakfast: Past Presidents of the Society are invited to meet for breakfast in the Crystal Room at 7:30 a.m. on Tuesday.

For the Ladies: Several events have been planned especially for the ladies by the North Carolina Dental Auxiliary. See complete program in this issue.

Door Prizes: Valuable door prizes will be awarded at the close of the final General Session on Wednesday morning in the Ballroom. Only dentist-members are eligible and lucky ticket holders must be present to win.

Allied Meetings: Carolinas Chapter, American College of Dentists, luncheon, Sunday, May 10 at 12:00 noon, Crystal Room.

International College of Dentists, luncheon, Monday, May 11, at 12:00 noon, Crystal Room.

North Carolina Dental Assistants' Association, Pine Crest Inn, Pinehurst, May 9-12.

North Carolina Dental Auxiliary, The Carolina, May 10-12.

North Carolina Dental Hygienists' Association, Midpines Club, Southern Pines, May 10-13.

Medical College of Virginia, Class of '30 Reunion, dinner, Sunday, May 10 at 6:30 p.m., Crystal Room.

HOUSE OF DELEGATES NORTH CAROLINA DENTAL SOCIETY

1964

Speaker of the House

Ralph D. Coffey

State Officers

S. Byron Towler.....	President
Darden J. Eure.....	President-Elect
Barry G. Miller.....	Vice President
Dennis S. Cook.....	Secretary-Treasurer

Executive Committee

Thomas G. Collins, Chairman	
Pearce Roberts, Jr.	C. W. Poindexter
Edgar D. Baker	

Ethics Committee

Thomas M. Hunter, Chairman	
A. C. Current, Jr.	W. Stewart Peery
Norman F. Ross	Horace K. Thompson

First District

A. B. Breland
M. W. Carpenter
M. M. Forbes
John W. Girard, Jr.
C. B. Taylor

Third District

John S. Dilday
C. W. Horton
Maurice B. Richardson
Baxter B. Sapp, Jr.
T. Edgar Sikes, Jr.

Second District

J. A. Bingham, Jr.
J. B. Freedland
Robert A. George
Horace P. Reeves, Jr.
Paul A. Stroup

Fourth District

Worth M. Byrd
L. D. Herring
J. Henry Ligon, Jr.
William H. Oliver
Nash H. Underwood

Fifth District

M. W. Aldridge
C. T. Barker
R. H. Gilbert
W. T. Ralph
G. Curtis Wilson

Guest Speakers

General Session

8:30 p.m.

Sunday

Ballroom

JAMES P. HOLLERS, D.D.S.

San Antonio, Texas

President

American Dental Association

Dr. Hollers, 100th President of the American Dental Association, has had a distinguished career of service in governmental work, in civic affairs, and in his profession. Texas born, he attended Southern Methodist University and Texas Dental College, and received his D.D.S. Degree from Tulane University. His professional memberships include American College of Dentists, International College of Dentists, American Academy of Restorative Dentistry and Psi Omega Fraternity. He is a Past President of the Texas Dental Association and has served in the ADA House of Delegates.



House of Delegates

2:00 p.m.

Sunday

Bridge Room

WILLIAM A. GARRETT, D.D.S.

Atlanta, Georgia

Trustee, Fifth District

American Dental Association



Dr. Garrett has served as Trustee of the Fifth District of the American Dental Association since 1959, after representing Georgia in the ADA House of Delegates for 15 years. He is a general practitioner in Atlanta, a graduate of Atlanta-Southern Dental College, and has been on the dental faculty of Emory University since 1947.

Program

Sunday, May 10

8:00	Golf Tournament.....	Pinehurst Country Club
11:00	Registration Begins	Foyer
12:00	Luncheon, American College of Dentists.....	Crystal Room
1:00	Commercial Exhibits Open.....	West Porches
	Scientific Exhibits Open.....	Cocktail Lounge
1:00	Skeet Shoot.....	Pinehurst Gun Club
	Fishing Contest.....	Pinehurst Ponds
	Tennis Tournament.....	Pinehurst Country Club
	Bowling Tournament.....	OK Lanes, Southern Pines
2:00	House of Delegates, First Session.....	Bridge Room
3:00	Projected Clinics	Ballroom
6:30	Reunion Dinner, Class of '30, Medical College of Virginia.....	Crystal Room
8:30	First General Session.....	Ballroom
	UNC School of Dentistry Glee Club	
	Necrology Service	
	Recognition of Guests	
	Recognition of Allied Organizations	
	Address: S. Byron Towler, D.D.S., President, NCDS	
	Address: James P. Hollers, D.D.S., President, ADA	
	Report: Dental Foundation of N. C., Inc.	

Monday, May 11

7:30	District Officers' Conference Breakfast.....	Crystal Room
	James H. Lee, D.D.S., Presiding	
9:00	Film: Local Anesthesia in Dentistry: Mandibular Considerations	Ballroom
9:00	Reference Committee A.....	Pine Room
	Reference Committee C.....	Bridge Room
9:30	Final Adjustment and Cementation.....	Ballroom
	R. A. McEwen, D.D.S., Atlanta	
10:30	Reference Committee B.....	Pine Room
	Reference Committee D.....	Bridge Room
11:00	Clinical Pharmacology, Preanesthetic Evaluation, Complications and Safeguards of Local Anesthetics	Ballroom
	Raymond E. Boudreaux, D.D.S., New Orleans	

12:00	Luncheon, International College of Dentists.....	Crystal Room
2:00	Film: Immediate Denture Surgery.....	Ballroom
2:00	Reference Committee—Ethics.....	Bridge Room
	Reference Committee—President's Address.....	Pine Room
2:30	Mouth Preparations for Removable Partial Dentures.....	Ballroom
	Colonel Frank C. Jerbi, D.C., Walter Reed Army Medical Center	
3:30	Reference Committee—Constitution and Bylaws.....	Bridge Room
5:30	Informal Social Hour for Members and Their Guests....	Front Lawn
8:30	Second General Session.....	Ballroom
	Election of Officers Selection of site for 1966	

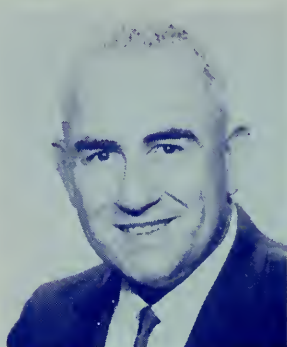
Tuesday, May 12

7:30	Past Presidents' Breakfast.....	Crystal Room
	E. D. Baker, D.D.S., Presiding	
9:00	House of Delegates, Second Session.....	Bridge Room
9:00	Film: The Challenge of Dentistry.....	Ballroom
9:30	Surgical Technics: Preparation of the Mouth for Dentures	Ballroom
	Raymond E. Boudreaux, D.D.S., New Orleans	
11:00	Immediate Dentures	Ballroom
	Colonel Frank C. Jerbi, D.C., Walter Reed Army Medical Center	
2:00	Film: Oral Exfoliative Cytology.....	Ballroom
2:30	Tooth Preparation and Impression Procedure for Fixed Prosthesis	Ballroom
	R. A. McEwen, D.D.S., Atlanta	
7:00	Annual Banquet.....	Dining Room
8:30	Shearen Elebash	Ballroom
10:00	Dance	Ballroom
	Dr. Clyde Young and his "Music Makers"	

Wednesday, May 13

9:00	Table Clinics	Ballroom
10:00	House of Delegates, Third Session.....	Bridge Room
11:30	Third General Session.....	Ballroom
	Installation of Officers Awarding of Door Prizes Adjournment, sine die	

Essayists



RAYMOND E. BOUDREAUX, D.D.S.
New Orleans, Louisiana

Dr. Boudreaux, a Fellow of the American College of Dentists and a Diplomate of the American Board of Oral Surgery, is currently Associate Professor, Department of Oral Surgery, Loyola University of New Orleans, where he received his D.D.S. Degree. He is a retired Colonel, U. S. Army Dental Corps. During his service career he served as Chief of Oral Surgery, Brooke General Hospital in San Antonio.

Monday, 11:00 a.m.

Ballroom

CLINICAL PHARMACOLOGY, PREANESTHETIC EVALUATION, COMPLICATIONS, AND SAFEGUARDS OF LOCAL ANESTHETICS

The mode of action, factors interfering with adequate anesthetic concentrations, a brief consideration of the molecular configuration of the anesthetic agent in relation to their hydrophilic and lipophilic properties, systemic reactions, their prevention and treatment, chemical groupings of dental local anesthetics in relation to allergic manifestations, vasoconstrictors used in dentistry and their occasional misuse. Evaluation of the patient in relation to the local anesthetic.

Tuesday, 9:30 a.m.

Ballroom

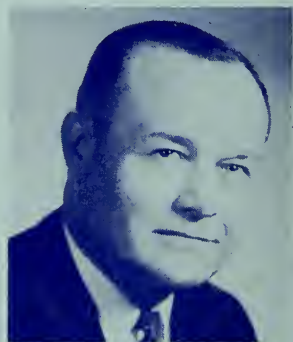
SURGICAL TECHNIQS: PREPARATION OF THE MOUTH FOR DENTURES

Surgical management and problems related to the preparation of the alveolar ridges and adjacent areas for dentures, including maxillary tuberosities, mandibular and maxillary tori, redundant tissue, epulis fissuratum.

COLONEL FRANK C. JERBI, D.C.

Walter Reed Army Medical Center
Washington, D. C.

Colonel Jerbi currently commands the Regional Dental Activity at Walter Reed Army Medical Center. He is a graduate of Loyola University of Chicago, a Fellow of the American College of Dentists, and a Diplomate of the American Board of Prosthodontics.



Monday, 2:30 p.m.

Ballroom

MOUTH PREPARATIONS FOR REMOVABLE PARTIAL DENTURES

A description of various mouth preparation procedures that increase the comfort, function, and appearance of removable partial dentures. The value of mouth preparation in preserving dental structures and simplifying denture design and construction.

Tuesday, 11:00 a.m.

Ballroom

IMMEDIATE DENTURES

A consideration of the indications and contra-indications for immediate dentures and the technics employed in their construction. A critical evaluation of the trimming of the casts and surgical procedures incident to the insertion of immediate dentures.

Essayists

R. A. McEWEN, D.D.S.
Atlanta, Georgia

Dr. McEwen is one of the pioneers in ultra speed. He is a graduate of the University of Alberta, a Fellow of the American College of Dentists, and a member of the Royal Society of Health (London). He practices in Atlanta and is Professor and Chairman of the Fixed Prosthesis Department at Emory University.



Monday, 9:30 a.m.

Ballroom

FINAL ADJUSTMENT AND CEMENTATION

This presentation will include a research report on cementing procedures and a movie film documenting the results. This project has created a great deal of interest and may result in a change of method in the use of oxyphosphate cements.

Also included will be a study on deplating techniques illustrated with 35 mm color slides.

The presentation will be concluded with a method for an orderly procedure for checking gold castings on the articulator and in the mouth to correct contacts, contour, and occlusion.

Tuesday, 2:30 p.m.

Ballroom

TOOTH PREPARATION AND IMPRESSION PROCEDURES FOR FIXED PROSTHESIS

This presentation will include a discussion of work simplification methods, the use of tray set-ups, up-to-date information on ultra speed, tooth preparation for full and partial coverage, a retraction technique for impressions with either rubber base or hydro-collod, and an improved method for fabricating temporary crowns and bridges.

Projected Clinics by Study Clubs

Sunday, 3:00 p.m.

Ballroom

1. **Responsibility—Ours and the Patient's**, Dr. Mett B. Ausley, Southeastern Periodontic Study Club.
2. **Immediate Root Canal Treatment**, Dr. Walter S. Linville, Jr., Loblolly Study Club.
3. **Minor Tooth Movement**, Dr. Jack E. Silvers, Coastal Study Club.
4. **Water**, Dr. George L. Edwards, Jr., Demeritt Pedodontic Study Club.

Table Clinics

Wednesday, 9:00-11:00 a.m.

Ballroom

- 1. Periodontia—Split Flap and Gingival Extension Procedures**, Dr. M. W. Aldridge, Greenville.
- 2. A Root Canal Treatment Procedure**, Drs. Reynolds A. Carnevale, and Thomas C. Boykin, Goldsboro.
- 3. Porcelain Baked to Gold for Crown and Bridge**, Dr. DeLeon Wells, Jr., Wallace.
- 4. Oral Mouth Guards**, Dr. Albert P. Cline, Jr., Canton.
- 5. Space Maintenance and Pedodontia in General Practice**, Drs. Robert P. Hagaman, Lenoir, and John H. Shell, Valdese.
- 6. Oral Manifestation of Systemic Diseases**, Dr. Stanford Harris, Weaver-ville.
- 7. Chair-side Replacement of Partial Denture Teeth**, Dr. David E. Hen-son, Franklin.
- 8. New Method for Fabricated Temporary Bridges**, Dr. Eugene W. Lawrence, Jr., Franklin.
- 9. What They See**, Miss Shirley Jordan and Miss Susan Prevost, N. C. Dental Hygienists' Association.
- 10. Endodontics**, Dr. Roy L. Earp, Raleigh.
- 11. Oral Pap Smears for Cancer Detection**, Drs. F. Durant Bell, and Arthur E. Davis, Jr., Raleigh.
- 12. Photograph in Case Presentation**, Dr. Gordon L. Townsend, Dunn.
- 13. Treatment of Exposures in Primary Teeth**, Dr. Thomas H. Fetzer, Raleigh.
- 14. Good Records Help Build a Good Practice**, Dr. Richard S. Hunter, Raleigh.
- 15. Practice Management**, Dr. Colin P. Osborne, Jr., Lumberton.
- 16. Photography in the Dental Office**, Dr. James A. Crawford, Raleigh.
- 17. Vital and Non-Vital Pulpotomy**, Drs. Theodore R. Oldenburg, and Benjamin R. Baker, UNC School of Dentistry.
- 18. Partial Dentures for the Cleft Palate Patient**, Dr. Matthew T. Wood, UNC School of Dentistry.
- 19. Pre-Extraction Records for the Immediate Denture Patient**, Dr. John B. Sowter, UNC School of Dentistry.
- 20. Practical Laboratory Hints**, Dr. Ludwig G. Scott, Burlington.

21. **Oral Examination and Charting, with Special Emphasis on the Periodontium**, Dr. James B. Howell, Greensboro.
22. **Improved Techniques When Using the Verticulator**, Dr. Clyde L. Taylor, Greensboro.
23. **Pin Restorations for Fractured Anteriors**, Dr. Marion L. Ralls, Greensboro.
24. **Recovery of Lost Teeth**, Dr. William M. Ditto, Greensboro.
25. **Full Denture Prosthetics for Child Patients**, Dr. James B. King, Jr., Chapel Hill.
26. **Dental Public Relations**, Drs. Charles W. Horton, and L. P. Megginson, Jr., High Point Dental Society.

Scientific Exhibits

Sunday, 1:00 p.m., through Wednesday Cocktail Lounge

1. **Dental Research at the National Bureau of Standards**, National Bureau of Standards.
2. **Straight Ahead for Fluoridation**, U. S. Public Health Service.
3. **Affiliated Dental Teaching Program**, Veterans Administration.
4. **Relative Exposure to Dental Personnel**, Division of Radiological Health.
5. **Comprehensive Cleft Palate Rehabilitation**, Dr. Donald W. Warren, UNC School of Dentistry.
6. **Education—Leadership—Research**, UNC School of Dentistry.
7. **The Dental Assistant**, North Carolina Dental Assistants' Association.
8. **Dental Technology**, Durham Industrial Education Center.
9. **Dental Assistant Training Program**, Burlington Industrial Education Center.
10. **Emergency Health Preparedness—Expanded and Additional Functions for Dentists**, North Carolina State Board of Health.
11. **Role of the Dentist in Cancer Control**, American Cancer Society.
12. **Dental Health for All**, Dairy Council Units of North Carolina.
13. **Oral Cancer**, Division of Oral Hygiene, North Carolina State Board of Health.
14. **Careers in Dentistry**, North Carolina Dental Society.
15. **North Carolina Dietetic Association.**
16. **Protecting the Heart Patient**, North Carolina Heart Association.
17. **The Magical Power of Emotional Appeal**, North Carolina Dental Hygienists' Association.

Special Exhibit

Sunday, 1:00 p.m., through Wednesday

Dutch Room

DENTISTS IN GRAY

Library and History Committee, North Carolina Dental Society
Neal Sheffield, D.D.S., Chairman



For the second year, this exhibit of dental instruments, documents, and artifacts of the Civil War era will be on display. Many interesting items have been added. The completed exhibit will eventually be made available to the North Carolina Hall of History in Raleigh.

Visual Education

Monday and Tuesday

Ballroom

- Monday, 9:00 a.m. Local Anesthesia in Dentistry: Mandibular Considerations** is a film requested by Dr. Boudreaux. The film affords an excellent anatomical review and the basic injection technics are demonstrated. It was prepared by the Cook-Waite Laboratories, Inc.
- Monday, 2:00 p.m. Immediate Denture Surgery** shows the technics for designing and using the surgical guides and their application to a practical immediate denture case. Film library of American Dental Association.
- Tuesday, 9:00 a.m. The Challenge of Dentistry.** The story of a high school student who is thinking about dentistry as a career. The appearance of Jim's dentist on an exciting TV program opens the young man's eyes to the many things dentistry embraces.
- Tuesday, 2:00 p.m. Oral Exfoliative Cytology.** Film showing various lesions, diagnostic procedures and the smear technic. A film for the profession. Source: Department of Health, Education and Welfare.

Commercial Exhibits

Sunday, 1:00 p.m. to 5:00 p.m.

Monday and Tuesday, 9:00 a.m. to 5:00 p.m. West Porches

You are urged to visit the commercial exhibits. These manufacturers, dealers, laboratories and other organizations will be represented by highly qualified people who can give you helpful hints on economical and intelligent buying.

Firm Name	Booth
Albert-Acan X-Ray, Inc., Woodside, New York.....	38
Astra Pharmaceutical Products, Inc., Worcester, Massachusetts.....	17
Block Drug Company, Inc., Jersey City, New Jersey.....	61
Bosworth, H. J., Company, Chicago, Illinois.....	49
Buran's Dental Laboratory, Asheville.....	16
Carolina Dental Laboratory, Raleigh.....	87
Carolina Dental Supply Co., Winston-Salem.....	51
Caulk, The L. D., Company, Milford, Delaware.....	14
Charlotte Laboratory, Inc., Charlotte.....	77
Chayes Dental Instrument Corp., Danbury, Connecticut.....	28, 29, 30, 31
Coca-Cola Company, Atlanta, Georgia.....	6
Dalburn Corporation, Charlotte.....	68 & 69
Densco, Incorporated, Denver, Colorado.....	47 & 48
Den-Tal-Ez Chair Mfg. Co., Des Moines, Iowa.....	34
Dental Perfection Co., Glendale, California.....	8
Dentists' Supply Co. of N. Y., York, Pennsylvania.....	35 & 36
Eaton Laboratories, Norwich, N. Y.....	53
General Electric Co., Milwaukee, Wisconsin.....	80 & 81
Getz, William, Corporation, Chicago, Illinois.....	32
Greensboro Laboratory, Greensboro.....	15
Hanau Engineering Co., Inc., Buffalo, New York.....	28, 29, 30, 31
Hygienic Dental Mfg. Co., Akron, Ohio.....	28, 29, 30, 31
Johnson & Johnson, New Brunswick, New Jersey.....	43
Justi. H. D. & Sons, Inc., Philadelphia, Pennsylvania.....	50
Keener Dental Supply Co., Asheville.....	55 & 57
Kerr Manufacturing Co., Detroit, Michigan.....	21
Lactona Products Division, Morris Plains, New Jersey.....	59
Lederle Laboratories, Pearl River, New York.....	58
Lilly, Eli & Co., Indianapolis, Indiana.....	66
Lippincott, J. B., Company, Philadelphia, Pennsylvania.....	83
Lochhead Laboratories, Inc., Cincinnati, Ohio.....	9
Mayrand, Inc., Greensboro.....	64

Firm Name	Booth
Merrell, William S., Co., Cincinnati, Ohio.....	72
Midwest Dental Manufacturing Co., Melrose Park, Illinois.....	4
Mizzy, Inc., Clifton Forge, Virginia.....	12
Novocol Chemical Mfg. Co. Inc., Brooklyn, N. Y.....	78
Oral B Company, San Jose, California.....	39
Ormco Corporation, Glendora, California.....	82
Palmero, J., Sales Co., Westport, Connecticut.....	44
Pedodontic Service, Inc., Charlotte.....	86
Pelton & Crane Co., Charlotte.....	41 & 42
Powers & Anderson Dental Co., Inc., Charlotte.....	19 & 20
Premier Dental Products Co., Philadelphia, Pennsylvania.....	5
Procter & Gamble Distributing Co., Cincinnati, Ohio.....	2
Professional Budget Plan, Madison, Wisconsin.....	3
Professional Dental Cabinetry, Odenton, Maryland.....	13
Professional Management, Asheville.....	40
Raleigh Dental Laboratory, Raleigh.....	67
Rinn Corp., Chicago, Illinois.....	28, 29, 30, 31
RC—Nehi Bottlers of N. C., Greenville.....	33
Richmond Dental Cotton Co., Charlotte.....	73
Ritter Co., Inc., Rochester, New York.....	22, 23 & 24
Rothstein Dental Laboratories, Inc., Silver Spring, Maryland.....	70
Saunders, W. B., Co., Philadelphia, Pennsylvania.....	79
Schering Corporation, Union, New Jersey.....	89
Smith, Paul K., Decatur, Georgia.....	28, 29, 30 & 31
Squibb, E. R., & Sons, New York, New York.....	10
Sturgis, J. Minor, Porcelain Laboratory, Atlanta, Georgia.....	11
Sullivan Laboratories, Washington, D. C.....	1
Surgident, Ltd., Los Angeles, California.....	7
Thompson Dental Company, Greensboro.....	25, 26 & 27
Tincher Dental Lab., Charleston, West Virginia.....	52
Union Broach Co., Inc., Elmhurst, L. I., New York.....	60
Universal Dental Co., Philadelphia, Pennsylvania.....	54
Vick Chemical Co., New York, New York.....	88
Walker-Sizer Dental Co., Raleigh.....	45, 46, 74, 75 & 76
Weber Dental Mfg. Co., Canton, Ohio.....	62 & 63
Westlund Dental Studio, Inc., Minneapolis, Minnesota.....	71
White, The S. S., Dental Mfg. Co., Philadelphia, Pennsylvania.....	84 & 85
Whitehall Laboratories, New York, New York.....	37
Wilkie's Dental Laboratories, Burlington.....	18
Woodward Prosthetic Co., Greensboro.....	90 & 91

NORTH CAROLINA DENTAL ASSISTANTS' ASSOCIATION
FOURTEENTH ANNUAL MEETING
PINE CREST INN, PINEHURST, NORTH CAROLINA
MAY 9-12, 1964

PROGRAM

Saturday, May 9

5:00 RegistrationMain Lobby

Sunday, May 10

8:00 Breakfast Honoring Past Presidents.....Main Dining Room

9:00 RegistrationMain Lobby

10:00 First Session Business Body.....Card Room

1:00 Guest Luncheon.....Dining Room

2:00 RegistrationMain Lobby

2:30 General Session.....Card Room

9:00 Open House.....Card Room

Monday, May 11

9:00 RegistrationMain Lobby

9:30 Second Session Business Body.....Card Room

11:30 Table Clinics.....Card Room

7:00 Banquet.....Main Dining Room

9:00 Dance.....Elk's Club, Southern Pines

Tuesday, May 12

9:00 RegistrationMain Lobby

9:30 Third Session Business Body.....Card Room

11:00 Fourth Session Business Body.....Card Room

Mrs. C. W. Poindexter
President-Elect



Mrs. Marvin E. Walker
Vice President



Mrs. D. Clyde Young, Jr.
President



**NORTH CAROLINA DENTAL AUXILIARY
OFFICERS
1963-1964**

Mrs. Roy L. Earp
Treasurer



Mrs. S. Byron Towler
Parliamentarian



Mrs. L. C. Holshouser
Recording Secretary



Mrs. W. W. Rankin
Historian

Mrs. John Zimmerman, Jr.
Corresponding Secretary

NORTH CAROLINA DENTAL AUXILIARY

FOURTEENTH ANNUAL MEETING

THE CAROLINA, PINEHURST, NORTH CAROLINA

MAY 10-12, 1964

PROGRAM

Sunday, May 10

10:30-5:00	Registration	Foyer
8:30	General Session, North Carolina Dental Society.....	Ballroom
	(Auxiliary members cordially invited)	

Monday, May 11

8:30	18-Hole Golf Tournament.....	Pinehurst Country Club
9:00-5:00	Registration	Foyer
10:00	9-Hole Golf Tournament.....	Pinehurst Country Club
	(Keep Putts)	
12:00	Putting Contest.....	Pinehurst County Club
1:30	Luncheon.....	Pinehurst Country Club
2:00	Tennis Matches.....	Pinehurst Country Club
3:30	Executive Board Meeting.....	Crystal Room
5:00	Past Presidents' Meeting.....	Crystal Room
5:00	Informal Social Hour for Members and Their Guests, North Carolina Dental Society.....	Front Lawn
8:00	Bridge and Canasta.....	Bridge Room

Tuesday, May 12

9:00-5:00	Registration	Foyer
9:30	Breakfast—Fashion Show.....	Dining Room
	(Honoring New Members, Wives of Senior Dental Students, Special Guests)	
	Business Meeting	
11:30	New and Old Executive Board Meeting.....	Pine Room
7:00	Banquet, North Carolina Dental Society.....	Dining Room
9:30	Dance, North Carolina Dental Society.....	Ballroom

To be admitted to Breakfast or any other Auxiliary activities, members must show membership card or Auxiliary name tag.

MIDPINES CLUB May 10-13, 1964 SOUTHERN PINES

May 10-13, 1964

SOUTHERN PINES

Sunday, May 10

4:00 RegistrationLobby
4:00 Executive Council Meeting.....President's Room
5:30 Official ReceptionTerrace

9:00 Registration Sun Room

9:30 Opening Session.....Sun Room

10:00 Greetings—Dr. S. Byron Towler, President, N.C.D.S.
Dr. Curtis Wilson, Advisor to the N.C.D.H.A.

10:15 “Continued Growth Both Professionally and Personally,” Dr. Mildred I. Morgan, Florida State University

11:15 Dental Health Seminars in North Carolina, Mr. H. W. Boss,
Procter & Gamble Company

12:00 Business Session

12:30 Luncheon **Terrace**

1:30 Free to visit Exhibits

4:30 Social Hour at the home of Mrs. Cecil Cameron, 515 E. Indiana Avenue, Southern Pines

9:30 Business Session.....Sun Room

10:15 “Money—Ways and Means of Making It,” Mr. Andrew Elam,
McCarley & Company

Business Session

12:30 **Adjournment**

The 1963 and 1964 members of the Executive Council will meet in the President's Room immediately after lunch.

9:00 Table Clinics, North Carolina Dental Society.....Ballroom
The Carolina, Pinehurst

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THE *Journal*
OF THE NORTH CAROLINA DENTAL SOCIETY

AUGUST, 1964



VOL. 47, NO. 3

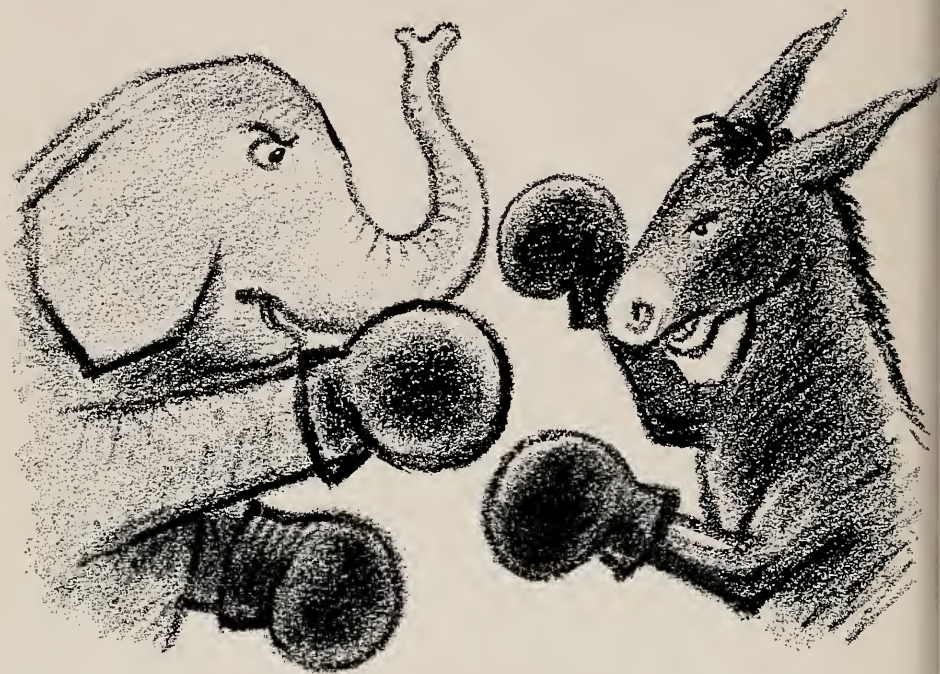
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District Programs

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THE JOURNAL

of

The North Carolina Dental Society

(A Constituent of the American Dental Association)

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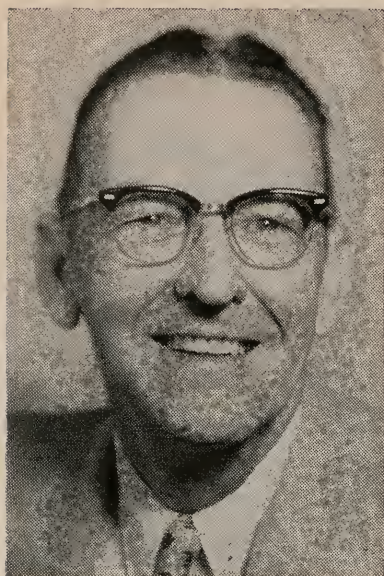
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This Issue Is Dedicated to . . .



**Guy E. Pigford, D.D.S.
Wilmington, North Carolina**

Dr. Pigford was born in Georgia, but his family moved to North Carolina early in his life so he considers himself a Tar Heel. He attended elementary schools in New Hanover County, Blackstone Military Academy in Virginia and was graduated from Atlanta Southern Dental College in 1925. After two years of private practice in Red Springs, he joined the dental staff of the State Board of Health under the late Dr. Ernest A. Branch. He returned to private practice in Wilmington in 1932. He served with the 252nd National Guard during World War II and was discharged with the rank of Major in 1944.

Dr. Pigford has always been an active supporter of organized dentistry, participating on local, district, and national levels. His insistence on the highest type of dental care for his patients, and his cooperation with and attitude toward his fellow practitioners has been a credit to the profession. His associates have always held the highest respect for his professional judgment and conduct.



The President's Page



WITH MUCH DEVOTION to our profession and a real sense of humility, it is my high privilege to serve and administer the duties and responsibilities as your President for the year 1964-65.

Each of us should take an inventory of ourselves. How much do we appreciate the efforts of those who have made our profession what it is today? What efforts are we willing to exert in order to make our profession continue to grow in stature among all other groups? How much do we love dentistry? How loyal are we to our North Carolina Dental Society? Our reaction to such thoughts, in reality, will determine the stature of the profession to which we have dedicated our lives.

If you have an idea that you honestly feel will help our profession attain greater service to mankind, then sow the seed, for if we fail to sow the seed, we shall lose it, like any other seed that is merely kept in a bin. We must trust our better impulses and ideas to the hazards of the weather and the wide fields of the world. It may "lose its life" but it will find harvest. Then it will provide both multiplied seed—cause other beneficent ideas to be born—and bread for the hunger of man. This is a law of nature and life. It is a promise of rich grace from an eternal God.

Much thought has been given to committee assignments. Several Committees are even now planning for our 109th Annual Session at Pinehurst, May 16-19, 1965.

The doctor who is sure he is practicing to the best of available knowledge, taking advantage of study courses and symposiums, who is genuinely concerned for his patient, has an awareness of world problems, and lends his voice, time, and money to support the solution, need have no apprehension for the future.

DARDEN J. EURE, D.D.S.



Barry G. Miller, D.D.S.

EDITOR'S COMMENT:

Professional Responsibility

The author now has two jewels, for he has shared. Commencement—the blastoff for knowledge—with a charge for the wisdom for the application of this power.

Periodontia: Requisites for Treatment

Dr. Howell has said it well. The issue of license is to treat all dental disease. There is more to it. Let us diagnose and then plan therapy.

I See Dentistry

David Simpson, Class of 1966, University of North Carolina, takes a close look. As one prominent dentist has said, "Would it not be of interest to read what each of us might write upon taking a closer look." Is the future not bright?

Fay Jenny, President of Dental Hygienist Association of North Carolina, reflects for us an interesting view. Yes, perhaps this is one of the better avenues for making

available more service to the public. Do not all the facts suggest that it is a dentally oriented population that we seek? The hygienist compliments our efforts.

The "Girl Friday" shares her thoughts. Reandy Clement, for posterity has recorded well. As we read her thoughts, let us be appreciative for the dedication of the Assistants Group.

What It Means to Go to the Dentist

Winning essay for a program carried on by the Southeastern Dental Society, Children's Dental Health Week '64. Janice has given interesting comments, but of more import than these comments would be the sublime forces in the interest of dental health as an outgrowth of this contest.

Dental Foundation

The Dental Research Center, in reality, as our Secretary-Treasurer, John Brauer, so beautifully suggests, is but a commencement.

IN THIS ISSUE

JANICE HATCHELL ("What It Means to Go to the Dentist") was graduated from Lumberton High School in June, 1964, and plans to enter Duke University this fall. During her high school career she distinguished herself academically. A member of the National Honor Society and a National Merit Scholarship finalist, she was recognized for excellence in mathematics and was named the best second-year student in French.



JANICE HATCHELL

JAMES B. HOWELL, B.S., D.D.S. ("Periodontia: Requisites for Treatment") was born in Ellerbe, is a graduate of Davidson College and the Medical College of Virginia and has completed graduate work in periodontia at Columbia University. He has practiced in Greensboro since 1950.



JAMES B. HOWELL

RALPH D. COFFEY, D.D.S. ("Professional Responsibility") has practiced in Morganton since he was graduated from Atlanta-Southern Dental College in 1931. He is a past president of the North Carolina Dental Society and is currently serving his fifth term as Speaker of the House of Delegates. He is a native of Yancey County.



RALPH D. COFFEY

FRANCIS A. BUCHANAN, D.D.S. ("Report on the 15th National Dental Health Conference") is a 1955 graduate of the U.N.C. School of Dentistry. He was born in Sylva and is in practice in Hendersonville.



FRANCIS A. BUCHANAN

Editorials

The Purpose of Your Journal

THE DENTAL SCHOOL, like the filling station, assures you of energy for a limited distance. Your State Journal and others of more specific interest would offer you other filling stations down the highway.

In the contents, we hope you will find maps that will direct you to new knowledge—power, a tiger in your tank, so to speak—wisdom to help make the right application of this knowledge.

Formally, our purpose would be to “inspire and motivate the dentists of North Carolina to be informed and to be continuing students.” We will go beyond this in matters of importance to the profession. Dental Service Corporation, the day is late — the circumstances under which — can we not create the circumstances? Dental Public Health, let’s take a new look.

Your editors will offer controversy and, we hope, challenge. May you accept them. See “Share Your Professional Life” on this page.

Share Your Professional Life

Articles for the JOURNAL are requested on 8½ x 11 bond paper typed double space.

Photographs — black and white, 3 x 5 to 5 x 7.

The faculty of Ohio State University, School of Journalism suggests

that these nine principles of writing might be helpful:

1. Purpose — write functionally, induce the reader to read using the elements of a story.
2. Accuracy — you be the judge.
3. Completeness — simply answer all the questions that are raised.
4. Brevity — with clarity.
5. Pace — use verbs that will fit the situation and keep the reader in action.
6. Life — show the reader detail, simply stated short sentences, short paragraphs, sub-headings.
7. Objectivity — state the facts.
8. Restrain — emphasis of the understatement, simplicity.
9. Enterprise — create curiosity, raise questions.

And your editor would believe that we all seek through the writings of your JOURNAL

- (a) to be recognized as better dentists.
- (b) to have the interest and adventure of the new and varied services of dentistry.
- (c) for ever increasing security for our families, our profession, personnel of our offices, and ourselves.
- (d) lastly, that ours will be a generous receipt of longevity.

Will you not contribute. For as Dr. Coffey has said, “If you have

anything, its value is doubled if you share it."

John Rand Dixon

CHAIRMAN DIXON of the Federal Trade Commission overlooked part of his information. What of the available facts on mortality and morbidity of alcoholic beverages and the automobile? Where shall our labeling cease?

As a dental profession we hold strong positions with regard to any dangers to the health of the public. Our position over the years has been unequivocal. As students of public health interests, the dental profession would be high in its regard for a fair application in the area of commerce to all forces offering insult to the best health of the public.

In the case of tobacco (and it is recognized there are potential debilitations to human tissues from its use), would not, Mr. Dixon, the answer be found in the area of research and education?

Back in the Profession

THE ISSUE OF LICENSE is for the practice of dentistry. The public is protected, so is the profession. In practice the conformity is to divide the patient's dental considerations among the "specialists." The moratorium on further limitations of the practice of dentistry issued by the A.D.A. House of Delegates was and is clear warning to us that the total patient is the responsibility. Perhaps a second look would be in order for the fragmentation of the

profession by special interest groups. Pedodontists, Orthodontists, Exodontists, Periodontists, and on up the list, organized dentistry is yours. There is little that the individual or small group can do to influence policies of the profession. United, ours is a voice that will continue to direct an elevation of the service. Let us remember that we are first members of the dental profession and a subservient interest must be to our special interest groups.

Patient Education

Writing along controversial lines may stimulate some interesting articles from you, the readers. We welcome you to send them into the JOURNAL office for we feel the need to share ideas and common problems is healthy.

Have you ever been National Children's Dental Health Week Chairman in an area which has never had this program before? Have you had the desire to put all your energy to work in this program with twenty dollars or less to spend? If you find yourself in either one of these two situations, the aids of the Procter and Gamble Company will be most welcome. Your editor realizes this program has been highly successful in certain areas of the State, unanimously accepted by some local dental societies, turned down by some others, and even refused by some school officials, but highly recommended by others.

The differences of opinions could stem from the probability of endorsing a particular toothpaste versus a need for aids in furthering patient education by the dentists. Would

you say that when the University of North Carolina School of Dentistry, or a private practicing dentist, gives patients a Lactona toothbrush that they are endorsing that particular toothbrush, or are they giving the patient something he needs? Because of this, school officials who do not welcome us may well be placing dental disease close to the category of piano lessons, professional hair dressing, etc.

When you see all the dentists in a particular town close their offices and take their assistants and hygienist (if they are fortunate enough to employ one) and spend their day in the city and county schools examining teeth and showing children how to brush their teeth, it gives you a very rewarding feeling.

When a principal thanks you afterwards for giving a toothbrushing kit to children who have never owned a toothbrush or a tube of toothpaste before, an endorsement never enters your mind.

When one of your colleagues examines 128 third grade students in one school and only one of them

has ever been to the dentist for a restoration, and when 80 per cent of all the children examined in the county need to go to the dentist, and teachers anxious to get teaching aids and attend seminars on dental health, the need for greater patient education outside the dental office is vital!

Procter and Gamble aids are valuable assets as long as the dentists take enough interest in their National Children's Dental Health Week program to use the parts of it that make their program successful.

Here's hoping we will go out and do the job using all aids that will benefit all people and strive to get the demand for dentistry closer to the need for dentistry. Statistics, then, will be more valuable to everyone, especially the young dentist trying to choose a location. Let us not be so concerned about whether it is an endorsement of a particular toothpaste or not, as long as we use every aid within our power to improve patient education — because the job to be done is greater than time will allow.

"New Dimensions in Dental Health" was the theme of the 15th National Dental Health Conference in Chicago April 27-29, sponsored by the A.D.A. Council on Dental Health. At the request of the President, Dr. Buchanan voluntarily represented the Society at the meeting. These are his comments on the conference.

15th National Dental Health Conference

FRANCIS A. BUCHANAN, D.D.S.

MORE THAN TWO-THIRDS of the program was devoted to prepaid dental insurance. My observations were:

(1) In years to come, labor unions will press for prepaid dental insurance for their members. This will be on a national basis, and possibly one large union will ask for this within this month.

(2) It is to our advantage as a profession to establish a dental service corporation so that it will be available when the demand comes. We will have some say-so in our future.

(3) By forming a dental service corporation, we can have a voice in the insurance program as relates to fees, etc. At least 40 per cent of

the directors of the dental service corporation should be lay persons.

(4) There should be a national organization of dental service corporations to bring unity to the program on a national basis.

(5) The dental service corporation will have to compete with outside profit and non-profit insurance companies.

(6) There are many unanswered questions relating to prepaid dental insurance. We must be ready to experiment to achieve a workable solution to these questions.

OAKLEY MEDICAL BUILDING
HENDERSONVILLE
MAY 5, 1964

The Dental Foundation of North Carolina, Inc.*

JOHN C. BRAUER, D.D.S.

The Symbol of Progress

It would be interesting and worthwhile for all of us to pause for a few moments to reflect on what has happened in North Carolina as a result of the efforts of the leadership in our profession during the period of 1947 to 1950, when major attention was directed to the establishment of the School of Dentistry in Chapel Hill, and, then, in the fall of 1950 when the Dental Foundation of North Carolina was organized. What would the profession of dentistry be like in North Carolina in 1964, if the school and the Dental Foundation had not been organized and developed?

Research Center A Reality

This is not the time nor the place to identify all the accomplishments, or to imply that our mission in the dental profession, the dental school, and the Foundation has been completed. In reality, it is timely that each of us rededicate ourselves to

the future, and to build upon that higher plane which the profession and its many friends now have established.

Dentistry as a profession in North Carolina has grown and matured appreciably in the eyes of the scientific community here in this state, nationally, and internationally, as a result of the School and the Dental Foundation.

The Dental Research Center, with its building, land, equipment and facilities valued at more than two million dollars, now is a reality, and less than two years ago it was only a dream in the hearts and minds of many in this State. With the beginning of construction, day by day this monument will rise and mature, and with it the stature of our profession in the eyes of the public and other educational and research centers. The dollars, the efforts, and the time, which many of you have put into this center —

* Report presented by John C. Brauer, D.D.S., Secretary-Treasurer, Dental Foundation of North Carolina, Inc., to the General Assembly of the North Carolina Dental Society, Sunday, May 10 1964, Pinehurst, North Carolina

your Dental Research Center, will continue to pay great dividends and multiply a thousand fold in the immediate years ahead.

Bawden Appointed

Dr. James W. Bawden, as you know, has been appointed Assistant Dean and Coordinator of this Center, effective September 1, 1963. His background in dentistry, which includes a D.D.S. degree and an M.S. degree in Pedodontics, and then a Ph.D. in Physiology, will provide the quality of leadership which all of us have envisioned. Time, today, does not permit a full report on the many accomplishments of Dr. Bawden, nor does it allow me to identify and present adequately the other professional colleagues who already have established residence in Chapel Hill, and who will be associated with the Research Center. Already, even before the Center is completed, research grants totaling more than \$700,000 have been realized, involving an annual consideration of about \$270,000.

Briefly, it should be stated that progress is evident in every direction, and fortunate indeed is the individual in our profession who truthfully can say, "yes, I have had a real and vital part in the establishment and development of this Center." Then, it is important that we say "thanks," too, to our immediate friends associated with the dental

manufacturers, the dental supply companies, and the dental laboratory industry. Further, without the many areas of major support on the part of the University Administration our efforts and realization still would be in the embryo stages. Accordingly, the team concept, involving many important players and plays, has been necessary in making this latest achievement possible.

Without the leadership and true dedication to our profession on the part of many throughout this State, the large measure of success could not have been realized. It has indeed been great, and no state in the United States at this time can demonstrate an equal accomplishment.

However, lest we forget what professional progress implies, and the responsibilities which we have assumed in wearing the noble cloak of the D.D.S. degree, it is important that each of us recognize the changing world and the need for continuous study and research. Our profession soon will "die on the vine," even with fine buildings, tradition, and past accomplishments unless we continue to move into higher plateaus, educationally, operationally, socially, and spiritually.

The new Dental Research Center is a symbol of progress and a milestone. It is not the end of the road, and each of us must have a recognizable share in the achievements of tomorrow.

An award winning essay by a 1964 high school graduate. With rare talent she describes . . .

What It Means to Go to the Dentist

TWICE A YEAR I feel a vague uneasiness descend upon me. Every time the phone rings, my knees begin to knock, and my stomach begins to throb with nervous anticipation, the cause unknown. As the days pass, the tension builds until I am finally able to pinpoint its origin: it is time for my dental checkup.

I hope that the nurse will forget to remind my mother of my approaching appointment, but my hopes are in vain, as the fatal telephone call never fails to come. A date is set, and I begin a week or two of living in mortal dread of it. As the day comes closer and closer, my mind begins to manufacture innumerable excuses to use in a rather futile attempt to put off the day of reckoning, but common

sense and my mother reject them all. As a last resort, I cling to the chance that my dentist may contract a cold or some other minor illness; but, as he is invariably in the best of health during the week of my appointment, this hope is also an empty one.

By the time the day arrives, all my hopes have been methodically crushed, and quiet resignation to my fate has come. I arrive at the dentist's office wearing the expression of a martyr walking to his death. I speak to the receptionist and take my place in the waiting room. Calmly thumbing through last year's magazines, I begin to build up a bit of confidence, which deserts me the instant the receptionist calls my name.

Escorted by a nurse, I shakily

JANICE HATCHELL

make my way into the examination room, where I am installed in a chair. Certain that my time has come, and that I will never emerge from my seat, I nevertheless steel myself for the ordeal I expect to follow. Eyes riveted to the door opposite me, I await the arrival of the dentist.

Finally, he enters. He smiles and speaks, and, after a short conversation, a minor miracle occurs. I suddenly find myself entirely confident and unafraid. The examination is conducted, and for once, I have no cavities. While my dentist is probing the innermost recesses of my wall-to-wall fillings, I have a few moments in which to think. During this short period of meditation, I come to realize that the greater portion of my fears were

foolish, and that my dentist is not a medieval torturer transplanted into the twentieth century.

Having been dismissed after a short lecture on the care of my teeth, I make my way home. As I ride, I ponder more about the session just completed, and to be repeated in six months' time. I realize that I am indeed fortunate to have the chance to benefit from the services of a competent dentist. As a result of my new outlook, I make a resolution to approach my next dental appointment a little more courageously, but I am nevertheless left with the feeling that, as a confirmed coward, I will break it.

LUMBERTON HIGH SCHOOL
LUMBERTON
MAY 2, 1964

Periodontia: Requisites for Treatment

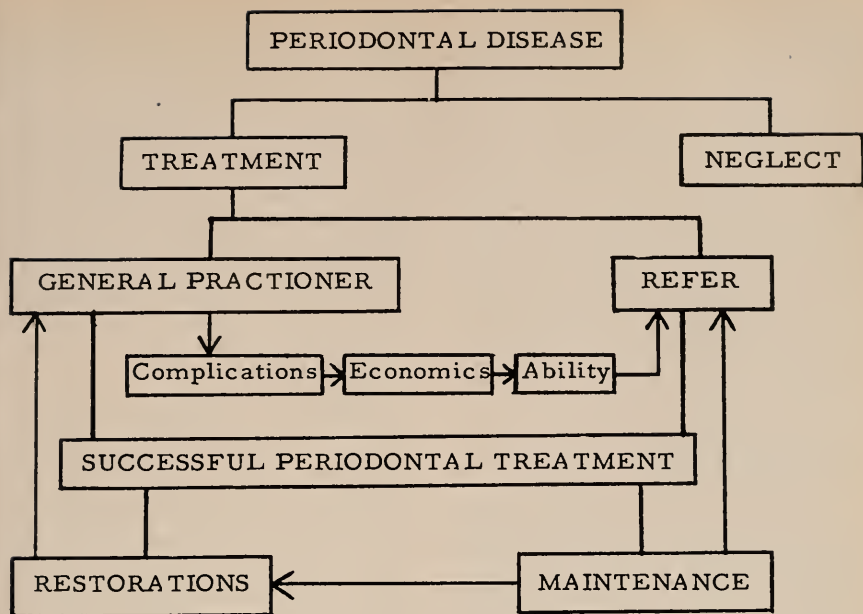
JAMES B. HOWELL, B.S., D.D.S.

In periodontal disease there is too much interest in how to treat the condition even before it is known what is being treated. In dental schools and refresher courses the student is bored by information leading to prevention and maintenance—even diagnosis and treatment planning—because these basic preliminaries take time away from treatment procedures (preferably surgical). This attitude has been a great detriment in teaching periodontia. An accurate diagnosis is absolutely necessary. Before an accurate diagnosis can be determined, a thorough knowledge of the condition must first be obtained. To do this, one must utilize an oral and medical history in conjunction with

a clinical oral examination. Before treatment, an analysis must be made and a complete treatment plan formulated. Only after a satisfactory plan exists is successful periodontal treatment possible.

HISTORY: ORAL AND MEDICAL

Everything has a history. History is paramount to understanding the present. This is most emphatically the case in the disease processes. The history not only helps to diagnose the case and formulate treatment, but it helps to establish the limitations and contra-indications in its treatment (*i.e.*, anesthetics, antibiotics, *etc.*). Dentists will naturally



question the patient about the origin of an acute, painful lesion. How often, though, is extracted an oral history which is adequate to detect or prevent less obvious lesions such as early cancer, traumatic occlusion, or early periodontal disease? The entire oral health of the patient, not just the health of the teeth, is the primary responsibility of the dentist. Modern medicine, in most cases, has left this area of the body to the dentist and depends on him to detect and treat most oral diseases. Has the dentist successfully assumed this responsibility? In too many cases he has not. He will not have fulfilled his duty until a complete oral history is taken and permanently recorded on all dental patients.

It is obvious that an oral history alone is insufficient but must be complemented by an adequate medical history. An adequate medical history for a dentist is one which must shed light on the following situations: (1) conditions which might have a cause or effect on the dental or periodontal treatment recommended, (2) conditions which might alter the procedure or method of treatment, (3) conditions which might lead to future oral problems, (4) medical problems or conditions which lead to medical problems, and (5) suspicion of any condition in which the patient might benefit from a thorough medical examination by the physician.

It is important that the dentist have a basic knowledge of the medi-

cal diseases and their symptoms. The first symptoms of many systemic diseases may be found in the oral cavity. Not only must the dentist consider oral diseases, but he must be ever on the alert for oral manifestations of systemic diseases. Although the responsibility of the treatment of these conditions is out of the dentist's scope, he has an ethical obligation to encourage and help the patient to seek medical assistance.

CLINICAL EXAMINATION AND CHARTING

All dentists recognize the necessity for a clinical examination. The usual deficiency is that the examination is poorly organized and incomplete. Too many cannot see the mouth for the teeth. If a complete clinical record is to be obtained, a good system must be followed to organize and record the clinical oral observation. A well organized chart with adequate space and clear symbolic notations is indispensable. In these instances the best memory is wholly inadequate. Completeness is important because the most obscure detail may be the key to successful treatment. Permanent records are necessary because, to evaluate the degree of success in treatment, one must be able to recall the past. This requirement is particularly true in periodontia since, because of the delay in initiating treatment, many advance cases are compromised from the beginning. It is extremely important that there be at the onset of treatment records of the oral health as well as complete entries stating that the treatment limitations were carefully explained to the patient. After treatment the clinical notations,

charting, and treatment process become a complete and invaluable part of the patient's history.

Presuming that the previously discussed diagnostic procedures have been satisfactorily completed, the case has now been diagnosed as periodontal and analyzed to the extent of the dentist's ability or desire. What alternatives face the dentist in the management of this case?

COURSE "A"

Ignore the condition. (There is not any pain; the patient will probably never know; the teeth will be lost anyway; pyorrhea cannot be cured.) Resorting to this alternative is gross professional negligence. Its basis is strictly unethical practices and professional ignorance. Such a course is never justified.

COURSE "B"

Understate the extent of a condition to the patient and perform superficial periodontal care, thereby giving the patient no choice of benefiting from complete treatment. (This inadequate care will improve the acute symptoms. The patient will be satisfied until the condition continues to recur with eventual loss of teeth.) Such action is unacceptable to modern dentistry; it is **supervised neglect**. The patient will usually recognize the error and eventually condemn the dentist.

COURSE "C"

Explain completely the extent of the disease and the importance of early treatment. This is the only course of a competent, ethical dentist. When the **patient requests adequate periodontal care**, there are two alternatives.

Referral for Treatment: It is a fact that most patients respect the dentist who refers them to a specialist, for referral indicates special concern for the patient. However, the general practitioner still has the responsibility to refer his patient to a dentist who is well qualified to treat the existing condition.

General Practitioner's Treating: If the general practitioner considers treating his own periodontal cases, he should first justify his action in view of several factors: the complications of the case, the periodontal treatment ability of the operator, and the economic considerations.

The complications: Would they tax his periodontal treatment ability? Would the difference in scheduling disturb office routine?

The treatment ability: Is the training adequate? Is the experience adequate?

Economic considerations: Would they present economic problems in his office? Would the time-income ratio be equivalent to other office procedures?

After thorough explanation of his condition, the patient may still refuse adequate treatment. The dentist is, in this case, entirely justified in undertaking partial treatment as he deems advisable.

This paper makes no attempt to evaluate or grade the ability of a general practitioner. The license is-

sued by the State Board of Dental Examiners gives every dentist an equal right to treat all dental diseases. It is the ethical obligation of each dentist to critically analyze his own ability to treat any dental disease. The ability of the dentist in relation to the complexity of the case is the only ethical consideration. The economics and inconvenience involved are purely individual and non-professional factors. Above all, the general practitioner must be confident that his patient is receiving the best periodontal care available under the existing circumstances.

SUMMARY:

A complete examination and thorough analysis is an absolute necessity before attempting to treat periodontal disease. A thorough oral and medical history in conjunction with an oral clinical examination is an important part of this examination. In order to be fully utilized, this material must be carefully and systematically recorded. The patient should receive prompt and thorough periodontal care. It is the primary duty of the general practitioner to see that the patient receives the best periodontal care available.

917 NORTH ELM STREET
GREENSBORO

"I See Dentistry"

In the April issue the first two in a series of twelve articles representing various facets of our profession were presented. Here are three more. You are invited to drink deeply of them as they are but reflections of what the public sees.

"The Golden Link to Our Public"

FROM A DENTAL ASSISTANT

THE IMPORTANCE of the role of the dental assistant in the operation of today's modern dental office cannot be over emphasized. The well trained dental assistant is able to perform many non-professional duties thereby permitting the dentist to devote a greater amount of his time and energy to actual patient treatment or service.

Two of the most important areas in which the dental assistant may serve are patient relations and business relations. Many patients are made at ease by the cheerful smile and efficient business attitude of the dental assistant. Clad in her sparkling white uniform, the dental assistant inspires confidence, and through her intelligent conversation about dental health, she stimulates the patients' thinking and encourages their interest in dental health education.

The assistant, while performing a necessary non-professional duty for the dentist, receives a valuable education herself in the day-to-day operation of the business office. Often the dental assistant combines the functions of secretary, receptionist, business manager, record

keeper, chairside assistant, laboratory assistant, supply sergeant, diplomat and general "Girl Friday" to the dentist. By her willingness to accept and efficiently perform these many duties the dental assistant is performing a valuable service to herself, her dentist and her community.

The Broadening Horizon

The opportunities available to the dental assistant and the demands made of her are constantly increasing. Not many years ago the primary function of the dental assistant was to receive patients and perform simple housekeeping chores. Advanced professional training was limited and remained static for a long time and was obtained only by years of dedicated service and perceptive study. Today, however, this situation is changing. The American Dental Assistants Association has been a pioneer in educational programs to enable the working dental assistant to increase her professional knowledge and skill. The dental assistant now has the opportunity to attend extension courses, seminars and to complete the Certification Program. The dental as-

sistant who has never worked with the new improved techniques in dental materials could find herself lost in these new trends even though she may have many years of experience in the dental office. This alone should be sufficient challenge to every assistant to take advantage of the educational opportunities available to her.

The Ultimate Goal

With the emphasis currently being placed on formal educational training and on certification many girls wonder what the future holds for the dental assistants already in and loyal to dentistry. Will programs be planned for them to continue their dental education or will they be squeezed out by the professional, formally trained dental assistants of tomorrow? I think that as long as a girl has a desire to learn and keep abreast of changing trends in dentistry that she will find her services

demanding by the dental profession. It is, of course, preferred and recommended that all dental assistants take advantage of education courses available with certification as the ultimate goal.

More Service to Your Patients

One of the greatest assets which a dental assistant can have is her ability to work smoothly and efficiently with her dentist, anticipating, as nearly as possible, his wants and needs. This ability thus leaves the dentist free from worry about the many routine problems which arise from day to day.

As a career which offers many rewarding experiences and an opportunity to fulfill a service to others the role of dental assisting has few equals.

REANDY CLEMENT

VICE PRESIDENT

NORTH CAROLINA DENTAL
ASSISTANTS ASSOCIATION

"Optimum Dental Health for All"

FROM A DENTAL HYGIENIST

I SEE DENTISTRY as the profession with which I am proud to be associated. Dentistry is a mature profession which has combined its profound respect for the knowledge inherited from its pioneers with an enthusiasm for "self" improvement. It has evolved with dignity.

I see dentistry as the creator of my own profession — dental hygiene. In the beginning the dental hygienist was trained to work with children in public schools. She performed oral prophylaxes and taught dental health during the formative years when these preven-

tive services are most effective.

The prevalence of dental problems among young and old affected the scope of the hygienist and advanced her into the realms of private practice, hospital and industrial clinics, and public health. The needs of these areas, as well as the demands of a rapidly changing populus, formed the foundation of dental hygiene as it is today.

The present day hygienist is trained to perform all preventive dental services, thereby qualifying to relieve the over-worked dentist of one area of responsibility. She

works under the supervision of a dentist and she is legally limited as to the types and areas of her service. Unquestionably, this is as dental hygiene practice should be.

As a result of the conscientious efforts of dentistry to give all peoples adequate and complete dental service, the demand for the hygienist has grown beyond the present supply. This shortage of auxiliaries is not unique to dentistry, for other professions face similar problems. Education of more auxiliary personnel is certainly the long-range solution, but it cannot satisfy the immediate need. Surely the combined efforts of dentistry and dental hygiene, working together in good conscience for the good of the profession and the public, can find ways to relieve the present situation.

As a dental hygienist, I see dentistry in its dedication to the achievement of optimum dental health for all people. Through its constant search for knowledge, the profession, in the past fifty years, has shown greater progress than at any time in its history. Dentistry as a health science offers to the public more real benefits than any other health science. The "dental - conscious" population appreciates these benefits. Unfortunately, these dentally oriented people comprise a shockingly small percentage of the total population. Everyone in a free society has the opportunity to seek dental service. It is tragic that so many are completely unaware of its value. Herein lies one of the greater challenges of dentistry's future.

Certainly no one person in the profession can solve the problem of

public education. Everyone associated with dentistry can and should contribute to the solution through patient contact. A well-informed patient is dentistry's best disseminator of the facts about dental health.

The demands of a well-established practice make it impractical for the dentist to assume total responsibility for dental health education. Ideally, the dental hygienist is the person to whom this area of service should be entrusted. She not only has knowledge of the oral cavity and its importance to general health, but she also has training in the techniques of individual and group education. Given sufficient time to render the preventive services for which she is trained, as well as sufficient time to teach dental health, the hygienist can and will fulfill her obligation of service to dentistry and to the public.

I see dentistry at the threshold of a new era. Dental research has shown that caries control is possible. Various studies have indicated that well-trained auxiliaries can be of more assistance to the profession and can play a more important role in making dental health a reality for all people.

No doubt many problems will require solution before the ultimate goal is clearly visible. But dentistry has exhibited wisdom and insight in solving its past problems. I am confident that it will meet the challenge.

FAY JENNY
PRESIDENT
NORTH CAROLINA DENTAL
HYGIENISTS ASSOCIATION

"To Serve the Public to My Fullest Extent"

FROM A DENTAL STUDENT

I AM A SOPHOMORE dental student in the School of Dentistry at the University of North Carolina at Chapel Hill. Quite frequently during the past year and a half I have been confronted with the question, "Why are you studying dentistry?", or "What has dentistry to offer you as a lifetime occupation?"

Questions such as these are frequently quite difficult to answer to the satisfaction of a person who has no knowledge or appreciation of dentistry as a health profession and does not know of the dental services now available to the population. I was quite confident that I had made the right choice when I decided to enter dental school a year and a half ago, and during that time as a student I have become even more aware of the great opportunities available to me in dentistry. However, it is frequently difficult for me to adequately express to a person what dentistry has to offer me and what I feel I can contribute to the profession and the public. Perhaps only a dentist or dental student can appreciate why I am so pleased to have chosen dentistry.

My first serious interest in dentistry appeared when I was undergoing orthodontic treatment during my early high school days. During my frequent visits to the dentist's office I had many opportunities to observe the type of services which the dentist performed and the equipment which he used. I have always enjoyed performing mechanical tasks which involved the skillful use of my hands, yet I am also inter-

ested in scientific material of almost any type. Here, I felt, was the ideal opportunity to combine both interests into one field and at the same time to assume a position of responsibility as a member of the health profession team. Yet, when I entered dental school I had never actually realized the opportunities available to me in contributing to the progress of the profession itself or in the great public service which can be performed and is so severely needed in the dental health field.

Every person who enters the field of dentistry can and must provide some type of dental service to the public, no matter what the form of the service. Although I have not decided on what field of dentistry I would like to enter, I know that I can serve the public either directly as a practitioner or indirectly in teaching or research. More personnel are needed in all phases of dentistry, but probably the severest need is in the field of the general practitioner who can give all people adequate dental care at a price which can be met by all. I say "adequate" care because I feel that many people who see a dentist regularly are not receiving adequate care, not to mention those persons who never see a dentist at all.

I feel that it is the immediate task of our dental schools to produce more and better dentists who can offer adequate dental care to all of the people. Yet the dental schools must also maintain a well-trained staff and a progressive research program so that the advances

which are so badly needed in dental education and research will not be hindered. Thus I feel that regardless of what aspect of dentistry I decide to enter, I have the opportunity to serve the public well.

My personal aspirations in return for giving my life to dentistry are several. Most of all I would like to see the public educated in a program of preventive dentistry and oral hygiene such that the need for extensive dental care and restorative procedures be reduced to a minimum. Under optimum conditions, a program such as this would alleviate the problem of the dental manpower shortage to the extent that all people could receive what has been termed adequate dental care. I am aware, however, that preventive dentistry through proper oral hygiene and diet is too idealistic a goal for the majority of the population. Perhaps through research a program of preventive dentistry can some day be realized incorporating the wide-spread use of some agent such as fluoride which would reduce caries and other oral disease to a minimum.

Recently I read an article in *McCall's Magazine* entitled "The Sad Case of Our Good Old-fashioned Dentistry." The article stated that nearly all people and many of our dentists neglect altogether the preventive aspect of dentistry. It further stated that the public image of

the dentist is that of a skilled repairman to whom you go only if you have a toothache. It is a paradox that, even though American dentistry is the best available in the world, the American people are a nation of "dental cripples." I personally feel that there is a great deal of truth in these statements, but I also think that the burden of changing the public image of the dentist is largely up to the members of the profession. Thus, I hope that by educating the public to an awareness of the high quality of dental care available to them and necessary to their overall health, and by improving their dental health through preventive dentistry, the public image of the dentist as an important member of the health team can be established.

As for myself, I am constantly finding new opportunities available to me in almost all phases of dentistry. I only hope that I can pick a field of dentistry which will give me a lifetime of satisfaction and personal enjoyment not only because of my own interest in that phase of dentistry, but also because I am able to improve the profession itself and to serve the public to my fullest extent.

DAVID M. SIMPSON
CLASS OF 1966
SCHOOL OF DENTISTRY
UNIVERSITY OF
NORTH CAROLINA

Professional Responsibility*

RALPH D. COFFEY, D.D.S.

In 1921, 43 years ago, a commencement day like this one at a North Carolina School of Dentistry was only a dream of a few men in the State. Sixteen years ago in 1948, sixty men, concerned with making the dream a fact, contributed \$10 each as a fund to search out a location for such a school. As most of you know, that initial contribution made possible the late Dr. O'Rourke's survey which placed the School of Dentistry here in Chapel Hill. Because of this earnest and rich beginning, we once again honor this day, and I for one am thankful that I can be present for such an occasion.

To you, ladies and gentlemen of this graduating class, I know the years have been long, and of this day you, too, have dreamed. I congratulate you. Your presence here today proves a record of which you may well be proud, and your achievement explains why I am so happy to be a part of these commencement day exercises.

Today makes tomorrow a reality for you. With your entrance into the profession of dentistry will come large responsibilities. It is not possible to convey to you the impact of these responsibilities. For example, parenthood in its real meaning is a responsibility because the responsibility carries with it both privilege and obligation. It is, then, an experience which combines both love and devotion. Although being a dentist is not to be a parent, the position is, nevertheless, to experience the same responsibilities of privilege and of obligation. It is this experience that you now come to. It is the climax of years of hard work. It is your reward. It is the beginning of a significant choice. Let me explain what I mean.

By all past standards each member of this class is already assured a place of honor in society, which means success in the professional and financial world, as well as a secure place in a community. No previous class has been graduated

* Presented at the graduation exercises of the Class of 1964, University of North Carolina School of Dentistry.

with as much knowledge as you have today. The same statement can be used for each succeeding year and be just as true. Accordingly, your first responsibility comes to you as a dividend: your station in life and the rewards which society bestows on you and on your family are assured.

Commencement—A Charge for the Pursuit of Knowledge

What are you to give in return? I know I labor the obvious when I point out that, for those of you who will enter private practice, the patient is your first and most important responsibility. Nevertheless, such a responsibility, for which you have already been given in the past four years the very best advice, is much more than an empty platitude. Your obligation here involves the significant choice I just mentioned. More important than the years you have spent in school is the responsibility of continuous education in dentistry. You must make this commitment, this choice, if you are to enjoy the privilege of your obligation. The meaning of your commencement is in the knowledge that this final day of your schooling is in fact only a beginning.

Where would the men of the 20's, 30's, 40's, and 50's be today if they had elected to rest comfortably with the knowledge they had at graduation? You are only now ready for your real education, and with the resources you now have at your command there is no limit to your growth as a dentist and as a person.

Wisdom for Application

Remember ^{one} thing, please. Don't tell a patient that a particular technique cannot be done. The man

on the next floor or in the adjoining building is already performing the technique well. Your continuing education is a responsibility you cannot avoid if you are to serve the public and your profession. Moreover, by virtue of the education you have and the position you hold, your obligation must extend beyond the purely clinical to participation in the whole life of your community: by the very nature of your commitment to significant action, you cannot enjoy a livelihood and give nothing in return—you cannot be free to act until you are bound to the very life of the community in which you choose to serve.

Act—Be Counted

All of this is a way of saying to you that at this moment—at this traditional ceremony—you publicly declare a choice; you commit yourself to something outside of yourself. Let me illustrate by recalling to you a remarkable short story by Henry James called "The Beast in the Jungle." The story is about a man, John Marcher, who sensed that he was singled out by destiny for a unique and overwhelming experience. He kept this "secret" to himself, revealing it finally to one woman whom he had once known and who became his confidante and watched with him through the years while he waited and explored the possibilities of the impending and singular event. But for John Marcher the event never came. The woman who gave her life to watch with him knew that his need was to act rather than passively to wait. He discovered too late that the "event" had passed him by, that it was his refusal to choose, to act, to commit himself to something out-

side of himself. His failure is the failure of a man who denies the moral demands, who refuses to become involved with something or someone other than himself, because to become involved means the chance of failure, means disappointment, suffering even, means gambling on the future, means to act in the present. But John Marcher refused the gamble; he chose, as he said, to be "lost in the crowd."

John Marcher's failure is the failure to be a whole man. He is symptomatic of a failure to make of choice no choice at all. If you believe that there is a safe way to fulfill your responsibilities, you can easily settle in a routine that can give an appearance of security and professionalism; you can pretend to yourself that you are fulfilling your obligations, and you can pretend that you are therefore safe from commitment and a chance of failure. Let me quote from a small poem of Robert Frost's which I think says better than I can what the nature of this difficult lesson of commitment is. The poem is entitled "Neither Out Far Nor In Deep."

The people along the sand
All turn and look one way.
They turn their back on the land.
They look at the sea all day.

As long as it takes to pass
A ship keeps raising its hull;
The wetter ground like glass
Reflects a standing gull.

The land may vary more;
But wherever the truth may be—
The water comes ashore,
And the people look at the sea.

They cannot look out far.
They cannot look in deep.
But when was that ever a bar
To any watch they keep?

At one level, the poem is talking about the value of R.D.H., B.S., or a D.D.S.; it is also saying something about choosing between land or sea. It is saying, in addition, something about our attitude toward the world into which most of us look neither very far nor very deep, but look just the same. Is the poem saying that what we don't know we don't care about and that what we care about we don't know? If we can't look out far or in deep, when did that ever bother us? I think the poem says all of these things; but I earnestly hope that for those of us here it is saying that we *do care* for those things we don't know about. This graduating class today could just as easily have been trained in Atlanta, Richmond, Philadelphia, or any number of other dental schools had it not been for those men in 1921 who did look out far and in deep. I hope that in the days and years that lie ahead all of you will look beyond the shallows of the easy sinecure and be challenged by the vision of those earlier men whose action and commitment made today possible.

Who Will Socialize Dentistry?

If we are to be bothered, then we can pursue such responsibilities as Dental Education, Research, Teaching, Organized Dentistry from the local level to the American Dental Association. What about the policies of our profession? *I* cannot change them—you cannot change them—but in concert *we* can make these policies together as

we see what is best for all. Organized Dentistry wants men of vision, and there is a special place for all those who will look out far and in deep—for those who will be bothered.

Today Is a Part of Tomorrow

Finally, on a day such as this we need to be reminded of one further privilege. All of us here are born into a traditional level of society which guarantees privilege. You could just as easily have been born a savage in Africa or a peasant in China. But destiny favored us all with a smile. We were born in a free society of comfort and plenty, but we learned early that such a privilege carries with it significant responsibilities too. To be equal to our obligations we must spend years in study just to understand this heritage and to become aware of the discipline that our position in the professional world and in society demands if we are to have any meaning at all. It is a responsibility that is the highest privilege, and to recognize this condition is to experience the only sense of fulfillment you will have in the days that lie ahead.

What makes anyone think that because he has been awarded a professional degree that he can thereby insure a state of bliss and happiness? You may find that all your preparation failed to give you the knowledge that sometimes failure is the only condition for understanding. Surely in this world there are days when we all fail, and every man's problem is the maturity to adjust to changing fortunes and to the deadening anxiety of routine—which is why it is essential that we be bothered about something. And

what better to be bothered about than our understanding of the privilege of responsibility?

You, this class today, are beginning to discover the dimensions of your selfhood. This discovery is surely more than a graduate degree in dentistry, or Oral Hygiene and yet it is an essential part of that degree. And if it is a practical end in itself, so too are all these responsibilities which I have been speaking of, and what could be more useful than to discover one's place in the sun? It is not given to many to know even this much.

Today, as we look upon the faculty who have long ago dedicated themselves to your training, we count ourselves fortunate to know them, for in knowing them we learn the real meaning of the Biblical injunction "Man does not live by bread alone." Certainly we count ourselves fortunate to have such a faculty who have shared themselves with our sons and daughters at a time in history when the world needs desperately men and women of such stature and character.

To you, ladies and gentlemen, we shall look forward to your full participation in our profession. For all of you it is my sincere wish that you will find in your professional lives a source of great joy and happiness. Today you become part of the world at a time when it is seriously disturbed. You can contribute and give leadership. You are the leaders—tomorrow is possible by today. If you have anything, its value is doubled if you share it. May God speed you. May you find an interesting and satisfying life-work in a world at peace.

P. O. Box 693
MORGANTON

Invitation to Asheville



M. M. FORBES, D.D.S.
President

HOW MUCH INTEREST do you really take in organized dentistry? Do you take the apathetic viewpoint that you do not need its help? You know, of course, that the grass roots of this organization is your District Society. It is here that some of our basic philosophies have developed. It is only here that **YOU** have a direct voice in the destiny of organized dentistry.

For this reason, if for no other, I urge your attendance and participation in our annual meeting at the Grove Park Inn, Asheville, North Carolina, on Saturday, Sunday, and Monday, October 3, 4, and 5, 1964.

Your officers and committees have been at work, and feel we have a fine program in store for you — beginning Saturday night with fellowship and fun, continuing Sunday with leisure and business, and climaxing Monday with table clinics and scientific sessions.

I wish to take this opportunity to express my appreciation and congratulations to the officers and committees for their many contributions to this meeting.

You and your wife have a most cordial invitation to attend the 43rd Annual Session of the First District Dental Society.

Program

First District Dental Society

GROVE PARK INN, ASHEVILLE

OCTOBER 3-5, 1964

Saturday, October 3

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|-----------|---------------------------|
| 4:00 p.m. | Registration, Lobby |
| 6:00 p.m. | Social Hour |
| 8:00 p.m. | Buffet—Hillbilly Hoe-down |

Sunday, October 4

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| 11:00 a.m. | Golf Tournament, Asheville Country Club |
| 2:00 p.m. | Registration, Lobby |
| 5:30 p.m. | Social Hour with Introduction of State Officers and Prospective Members |
| 6:30 p.m. | Dinner, Plantation Room |
| 8:30 p.m. | Opening Session, Laurel Room |
| | Call to Order |
| | Invocation |
| | Necrology Report |
| | Introduction of Visitors |
| | Minutes of Last Meeting |
| | Treasurer's Report |
| | Committee Reports |
| | Receiving of Applications for Membership |
| | Charge to New Members — Dr. G. Shuford |
| | Abernathy |
| | Old Business |
| | Election of Officers |
| | Installation of 1964-1965 Officers |
| | Adjournment |

Monday, October 5

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| 8:30 a.m. | Table Clinics, Green Room |
| 9:00 a.m. | Registration, Lobby |
| 10:00 a.m. | Dr. H. Milton Rode, "Full Dentures" |
| 12:30 p.m. | Combined Luncheon Meeting with Ladies Auxiliary, Plantation Room |
| 2:15 p.m. | Dr. H. Milton Rode, "Partial Dentures" |
| | Adjournment |

First District Essayist

H. MILTON RODE, D.D.S., B.S.
Philadelphia, Pennsylvania



Dr. Rode is a graduate of Franklin and Marshall College and the University of Pennsylvania, where he is currently chairman of the Department of Prosthetic Dentistry. He is a past president of the Academy of Stomatology and the Philadelphia County Dental Society, and a Fellow of the American College of Dentists and the Greater New York Academy of Prosthodontics. He is a consultant to the Veterans Administration Hospital and the Children's Hospital in Philadelphia, and is assistant chief in Prosthetics at Philadelphia General Hospital.

Monday, October 5

10:00 a.m.

FULL DENTURES

Monday, October 5

2:15 p.m.

PARTIAL DENTURES

Table Clinics

Monday, October 5

8:30 a.m.

1. **A Post Crown Technique**, Gerald F. McBrayer, D.D.S., Morganton.
2. **Rubber Base Impression**, S. Fletcher Clayton, D.D.S., Hickory.
3. **Considerations Concerning Silver Amalgam Restorations**, Wilburn A. Davis, D.D.S., Brevard.
4. **Audiovisuals in Dentistry**, Carey T. Wells, Jr., D.D.S., Canton.
5. **Cytology in Dentistry**, Omer W. Taylor, D.D.S. and James L. Winstead, D.D.S., Hendersonville.
6. **A Unilateral Quadrant Impression Bite Relator Technique**, Leonard B. Barber, Jr., D.D.S., Hendersonville.
7. **Direct Pattern Technique for Full Cast Crown**, C. G. Walker, D.D.S., Asheville.
8. **Prosthetics**, H. E. Bolinger, D.D.S., Marshall.



Second District Offers New Format

ROBERT A. GEORGE, D.D.S.
President

THE FORTY-FOURTH ANNUAL MEETING of the Second District Dental Society will be held at the Hotel Robert E. Lee in Winston-Salem, September 20-21, 1964.

On behalf of the officers of the Society I am happy to invite and urge every member to attend this meeting. A special and very cordial invitation is also extended to the officers and members of the North Carolina Dental Society.

The format of the program has been altered somewhat this year in order to allow more time for an expanded scientific session. An innovation this year will be the session on Sunday afternoon beginning at 2:45 p.m. which will feature Dr. Charles McCallum, Dean of the University of Alabama School of Dentistry. Following the Social Hour and Banquet on Sunday evening Horace "Bones" McKinney will speak.

Your table clinic committee has secured a wide variety of interesting clinics for presentation on Monday morning. We shall also begin each scientific session with a projected clinic as was so effectively done last year. Dr. Robert E. Sausen of the University of West Virginia will be on the program on Monday when he speaks on operative dentistry. Our meeting will be rounded out by a presentation on oral cancer detection by our fellow North Carolinian, Dr. Robert H. Sager.

Plan to come early Sunday afternoon and attend the entire meeting. The various committees have done excellent work in preparing a program which should be of interest and help to all of us. There will be time at the social hour and banquet on Sunday and at the luncheon on Monday for fellowship with old and new friends. Make your plans to attend now.

Program

Second District Dental Society

HOTEL ROBERT E. LEE, WINSTON-SALEM
SEPTEMBER 20-21, 1964

Sunday, September 20

12:00 noon	President's Luncheon
1:00 p.m.	Registration
1:00 p.m.	Executive Committee Meeting
2:45 p.m.	Projected Clinic. Dr. Nelson D. Large
3:00 p.m.	"The Evaluation and Management of the Patient with Systemic Disease," Dr. Charles A. Mc- Callum
5:30 p.m.	Social Hour
6:30 p.m.	Annual Banquet Guest Speaker, Horace "Bones" McKinney
9:00 p.m.	Opening Business Session Call to Order Invocation Report of the Secretary-Treasurer Recognition of State Officers Dr. Darden J. Eure, President Andrew M. Cunningham, Executive Secretary Necrology Service Election of Officers Election of Members
10:00 p.m.	Adjourn

Monday, September 21

9:00 a.m.	Registration
9:00 a.m.	Table Clinics
10:30 a.m.	Projected Clinic, Dr. W. Joseph Porter
10:45 a.m.	"Changing Concepts and Technology in Operative Dentistry," Part I, Dr. Robert E. Sausen
12:30 p.m.	Annual Luncheon Invocation President's Address Induction of New Members Installation of 1964-65 Officers
2:00 p.m.	Projected Clinic, Dr. Paul M. Cummings, Jr.
2:15 p.m.	"Changing Concepts and Technology in Operative Dentistry," Part II, Dr. Robert E. Sausen
3:15 p.m.	"Oral Cancer Detection," Dr. Robert H. Sager
4:15 p.m.	Final Business Session Report of Committee on President's Address Unfinished Business Adjournment

Second District Essayist

CHARLES A. McCALLUM, JR., D.M.D., M.D.
Birmingham, Alabama



Dr. McCallum received his D.M.D. degree in 1951 from Tufts College Dental School and his M.D. degree in 1957 from the Medical College of Alabama. He has been a member of the faculty of the Oral Surgery Department of the University of Alabama School of Dentistry since 1956 and Dean of the school since 1962. He is a Diplomate of the American Board of Oral Surgery and a Fellow of the American College of Dentists. He is Chairman of the Oral Surgical Section of the University Hospital, Birmingham and is a consultant in Oral Surgery to the Veterans Administration Hospitals in Birmingham, Tuscaloosa and Tuskegee.

Sunday, September 20

3:00 p.m.

THE EVALUATION AND MANAGEMENT OF THE PATIENT WITH SYSTEMIC DISEASE

Many patients today are living a longer life with disease processes. The diseased states dictate that the dentist modify his treatment in order to assure the patient the best possible care. The lecture will be concerned with the treatment of the patient with hypertension, diabetes, etc. It may also include a discussion of the management of emergencies in the dental office and a discussion of the various drugs which a dentist may use for sedation, analgesics, etc.

ROBERT E. SAUSEN, D.D.S., M.S.D.
Morgantown, West Virginia

Dr. Sausen was born in St. Paul, Minnesota. He is the son of a dentist. He received his professional education at the University of Minnesota, the D.D.S. degree in 1951 and the M.S.D. degree in 1953. He was first in general practice and a teacher at the University of Minnesota. Since 1958 he has been Professor and Chairman of the Department of Operative Dentistry at West Virginia University. He is a member of Omicron Kappa Upsilon and the International Association for Dental Research. He has published articles in national, state and foreign journals.



Monday, September 21

**10:45 a.m.-12:00 noon
2:15 p.m.-3:15 p.m.**

CHANGING CONCEPTS AND TECHNOLOGY IN OPERATIVE DENTISTRY

This lecture will be illustrated by the procedures in a Class II restoration. It will include the results of three years of clinical research observations of amalgam restorations.

Projected Clinics

Sunday, September 20

2:45 p.m.

Some Oddities Among Tumors, Dr. Nelson Large, Salisbury

Monday, September 21

10:30 a.m.

**The Management of the Rheumatic Fever Patient in the Dental Office,
Dr. W. Joseph Porter, Charlotte**

Monday, September 21

2:00 p.m.

**Periodontal Service, a Relative Failure Today? Why? Requisites for
Overcoming the Present Status. Dr. Paul M. Cummings, Jr., Winston-
Salem.**

Table Clinics

Monday, September 21

9:00 a.m.

- 1. Oral Smear Technique, Dr. Nelson Large, Salisbury.**
- 2. A Slide Presentation on Endodontics, Dr. Edmund B. Hopkins, Win-
ston-Salem.**
- 3. The Washed Field Technique, Dr. Fred Miller, Jonesville and Dr.
Keith Bentley, North Wilkesboro.**
- 4. An Aid in the Elimination of Open-Bite in Partial and Complete
Dentures, Dr. J. G. Rehm, Charlotte.**
- 5. The Lingual Arch Appliance in Pedodontics, Dr. John Archer, Char-
lotte.**
- 6. Periodontia, Dr. Stewart Peery, Charlotte.**
- 7. The Reverse Pin-Faced Crown, Dr. Pearce Roberts, Jr., Asheville.**
- 8. The Use of Kodacolor Prints as a Consultation Aid, Dr. Smith Kirk,
Salisbury.**



Ceramics— Theme of Third District

BAXTER B. SAPP, JR., D.D.S.
President

EACH YEAR we seem to feel that our annual meeting has reached its pinnacle, yet each year it seems to surpass the preceding one. It is with this thought that the officers and committees have worked these past months to make this meeting traditionally successful.

The meeting will be held at the Jack Tar Hotel which many will recall is an exceptional facility for this meeting. The first order of business will be the Duke vs. Maryland football game on Saturday, October 10. A special bus will be provided for transportation to and from the stadium. A cocktail party, dinner, and dance will be held that evening after the game, and reservations can be made by writing or calling Dr. Riley Stallings, Corcoran St., Durham. The tariff of \$9.00 per person includes a football ticket. A separate letter will be sent out to the members regarding the arrangements for this affair, and I urge you all to attend.

The golf tournament will be held on Sunday at the Hope Valley Country Club. Starting times begin at 9:00 a.m. and run consecutively until 10:30 a.m. I urge everyone participating in the tournament to observe this time.

We will follow our usual format on Sunday evening with the social hour, banquet, and general session. We will be privileged to have Mr. Carl Goerch as our guest speaker during the banquet hour. He will tell us of his experiences during his recent round-the-world trip.

The scientific meeting will begin on Monday morning with the table clinics. Running simultaneously with the table clinics will be a twenty minute projected clinic presented by Drs. Jerome and Robert Schweitzer.

Dr. Francis F. E. Morse of New York City is our featured clinician. He will present two lectures on the use of fired porcelain. This is one of the first such programs brought to this area in many years. Don't miss it.

Your Arrangement Committee is due special thanks for its effort in seeing that everything possible will be done for the convenience and enjoyment of every one in attendance.

A special welcome to the ladies! As in the past, your presence will add a great deal to our meeting.

I trust that your attendance at this meeting will be rewarding from all aspects. Please join us.

Third District Essayist

FRANCIS F. E. MORSE, D.D.S.
New York

Dr. Morse is a graduate of the University of Pennsylvania School of Dentistry. He is currently in private practice in New York City and is a Fellow of the Greater New York Academy of Prosthodontics, the American College of Dentists and the American Academy of Restorative Dentistry. Dr. Morse has appeared before the American Dental Society of Europe and numerous dental societies in the United States and Canada.



Monday, October 12

10:30 a.m. and 2:00 p.m.

ACHIEVING NATURAL AESTHETIC RESULTS IN LIFE-LIKE CERAMIC RESTORATIONS

This presentation will include the latest information on the procedures necessary to obtain aesthetic ceramic restorations. Proper shade selection, preparation, fabrication, staining and cementation will be demonstrated and discussed. Variations of the all-porcelain jacket crown and porcelain bonded-to-metal crowns will be compared. Indications and contraindications of unit built porcelain bridgework will be shown. The seminar will include Kodachrome slides and a table clinic demonstration.

Program

Third District Dental Society

JACK TAR HOTEL, DURHAM
OCTOBER 10-12, 1964

Saturday, October 10

12:00 noon	Registration
1:15 p.m.	Chartered bus leaves for Football Stadium
2:00 p.m.	Duke vs. Maryland Football game
5:30-6:30 p.m.	Social Hour
7:30 p.m.	Dinner
8:30 p.m.	Dance

Sunday, October 11

9:00 a.m.	Golf Tournament—Hope Valley Country Club
1:00 p.m.	Registration—Hotel
5:30-6:30 p.m.	Social Hour
7:00 p.m.	Banquet Speaker: Mr. Carl Goerch
8:30 p.m.	Opening Session Call to Order, Dr. Baxter B. Sapp, Jr., President President's Address Report of Secretary-Treasurer, Dr. Charles W. Horton Recognition of State Officers and Visitors Election of Officers

Monday, October 12

8:00 a.m.	Registration
9:00 a.m.	Table Clinics and Projected Clinic
10:30 a.m.	"Achieving Natural Aesthetic Results in Life-like Ceramic Restorations," Dr. Francis F. E. Morse, New York
12:30 p.m.	Business Luncheon Committee Reports Report on President's Address Old and New Business Selection of Meeting Place Installation of New Officers Adjournment
2:00 p.m.	"Achieving Natural Aesthetic Results in Life-like Ceramic Restorations," Dr. Francis F. E. Morse, New York
4:30 p.m.	Drawing of Prizes Adjournment

Projected Clinic

Monday, October 12

9:00 a.m.

REPAIR OF JEOPARDIZED BRIDGEWORK



Jerome Schweitzer, D.D.S.

Often large restorations are condemned because of the breakdown of key teeth. Methods to prolong the lifespan of such appliances are shown.



Robert D. Schweitzer, D.D.S.
New York

Table Clinics

Monday, October 12

9:00 a.m.

1. **Correction of Lingual-version Central Incisors**, L. R. Cashion, D.D.S., High Point.
2. **Construction of Single Cast Gold Crowns**, Charles W. Surles, D.D.S., High Point.
3. **Ceramco in the Dental Office**, Frank G. Atwater, D.D.S., Greensboro.
4. **Record Keeping in the Dental Office**, Lad Landau, II, D.D.S., Greensboro.
5. **Fixed and Removable Dental Prosthetic Appliances for Children**, James B. King, Jr., D.D.S., Chapel Hill.
6. **Partial Veneer Retainers-Porcelain Fused to Metal Pontics**, H. V. Murray, Jr., D.D.S., Chapel Hill.
7. **Exfoliative Cytology**, Robert H. Sager, D.D.S., Chapel Hill.
8. **Mandibular Distal Extension in Partial Denture Design**, Matthew T. Wood, D.D.S., Chapel Hill.



Capital City Host to Fourth District

L. D. HERRING, D.D.S.
President

THE FOURTH DISTRICT DENTAL SOCIETY extends a warm invitation to the members of the North Carolina Dental Society and their wives to attend its 44th annual meeting in Raleigh, September 28-29, at the Sir Walter Hotel.

On Monday old and new acquaintances will be made at the social hour at 6:00 p.m., followed by a banquet and dance. Mr. Edmund H. Harding will be the guest speaker at the banquet. He is well known and enjoyed as "The Tar Heel Humorist." Music by "The Esquires" will be featured at the dance.

On Tuesday I am sure you will enjoy the scientific programs which begin at 8:30 in the morning. We are privileged to have Dr. José E. Medina from the University of Maryland as our guest clinician. He will speak on "Amalgam Restorations" at 10:30 a.m., and on "Elastic Impression Materials" at 2:00 p.m.

Ladies, please accept this as an official invitation to you. The Dental Auxiliary will be meeting concurrently. Not only will you find this meeting interesting and entertaining, but you will have an opportunity to enjoy sightseeing and shopping in your Capital City.

I will be looking forward to seeing each of you, as we join together for fellowship and a program of self-education that we might better fulfill our obligation as members of the dental profession.

Program

Fourth District Dental Society

FORTY-FOURTH ANNUAL MEETING
HOTEL SIR WALTER, RALEIGH
SEPTEMBER 28-29, 1964

Monday, September 28

- | | |
|-----------|---|
| 6:00 p.m. | Social Hour |
| 7:00 p.m. | Banquet, Ballroom
Invocation, Dr. H. Royster Chamblee
Introduction of Guests, Dr. L. D. Herring |
| 8:30 p.m. | Entertainment, Mr. Edmund H. Harding, Tar Heel
Humorist |
| 9:30 p.m. | Dance, Ballroom, The Esquires Orchestra |

Tuesday, September 29

- | | |
|------------|---|
| 8:30 a.m. | Registration |
| 9:00 a.m. | Opening Session
Invocation, Dr. Richard S. Hunter
Report of Secretary-Treasurer, Dr. William H. Oliver
President's Address, Dr. L. D. Herring
Recognition of North Carolina Dental Society
Officers and Guests
Committee Reports:
Necrology, Dr. W. W. Rankin
Membership, Dr. Lawrence A. Cameron
Ethics, Dr. Thomas M. Hunter
Election of Applicants to Membership
Charge to New Members
Announcements |
| 10:30 a.m. | "Amalgam Restorations," Dr. José E. Medina,
Baltimore, Maryland |
| 12:00 noon | Luncheon |
| 1:00 p.m. | Table Clinics |
| 2:00 p.m. | "Elastic Impression Materials," Dr. José E. Medina, Baltimore, Maryland |
| 3:30 p.m. | General Session
Installation of Officers
Adjournment |

Fourth District Essayist



JOSÉ E. MEDINA, D.D.S.
Baltimore, Maryland

Dr. Medina is a graduate of Baltimore College of Dentistry, where he is currently assistant dean, head of operative dentistry, and director of postgraduate courses in operative dentistry. He is a staff member of the University Hospital in Baltimore, a lecturer at Walter Reed Army Medical Center, and a consultant at United States Public Health Service Hospital in Baltimore.

Tuesday, September 29

10:30 a.m.

AMALGAM RESTORATIONS

This presentation will delve into amalgam restorations, with particular emphasis upon those factors that influence their success or failure. The purpose of the presentation will be to discuss in detail how clinicians can obtain from amalgam its optimum results through a thorough understanding of cavity design and amalgam manipulation.

Tuesday, September 29

2:00 p.m.

ELASTIC IMPRESSION MATERIALS

The presentation will be concerned with an evaluation of the various elastic impression materials, such as hydrocolloid, mercaptan rubber and silicone rubber, with emphasis given to those variables that affect clinical accuracy.

Table Clinics

Tuesday, September 29

1:00 p.m.

1. **Space Gaining**, Frederick G. Hasty, D.D.S., Fayetteville.
2. **Office Forms**, Joseph M. Johnson, D.D.S., Laurinburg.
3. **Alloys for Today's Patients**, B. K. Wicker, D.D.S., Maxton.
4. **Endodontics for General Practitioners**, Thomas H. Byrd, III, D.D.S., Raleigh.
5. **Modern Orthodontics**, Vonnie B. Smith, D.D.S., Raleigh.
6. **Registration of Anterior Permanent Teeth**, E. Ben Ward, D.D.S., Whiteville.
7. **Everyday Dentistry**, Robert T. Byrd, D.D.S., Raleigh.
8. **Today's Dental Office**, Nash H. Underwood, D.D.S., Wake Forest.
9. **General Office Helps**, Lloyd B. Stanley, D.D.S., Raleigh.
10. **Tipping Anterior Teeth**, P. C. Purvis, D.D.S., Fairmont.
11. **Re-enforced Amalgam in Problem Cases**, Thomas M. Hunter, D.D.S., Henderson.
12. **Division of Oral Hygiene**, E. A. Pearson, Jr., D.D.S., Raleigh.
13. **Frenectomy**, Zyba K. Massey, D.D.S., Zebulon, and William J. Lee, D.D.S., Raleigh.

Subsidy or Knowledge



W. L. HAND, JR., D.D.S.
President

The Fifth District Dental Society does not need your

SUBSIDY
it needs **YOU!**

However, as far as you are concerned, if you do not attend the district meeting in New Bern September 27-28, the money is being spent for the program whether 1 per cent or 100 per cent of the membership is present.

Do you wish to further the postgraduate education of other members of the profession, or do you wish to come to the meeting
and learn more
about being

A GOOD DENTIST?

Your Program Committee has reached deeply into the knowledge of the profession to bring you Dr. José Medina on Operative Dentistry. The program will stimulate, educate, exasperate and aggravate. It is intended to make you **THINK** and to **HELP**.

Provided
you attend
or you can stay placidly at home
and ignorant.

So it's either **WELCOME TO THE MEETING** or thanks for the subsidy.

Program

Fifth District Dental Society

GOVERNOR TRYON HOTEL, NEW BERN
SEPTEMBER 27-28, 1964

Sunday, September 27

- 1:00 p.m. Registration, Governor Tryon Hotel
1:00 p.m. Golfing, Boating, Fishing, and Tryon Palace Restoration
4:00 p.m. Executive Committee
6:00 p.m. Social Hour
7:00 p.m. Banquet, Governor Tryon Hotel
Master of Ceremonies, Dr. Charles T. Barker
Invocation, The Reverend C. Edward Sharp
Address of Welcome, D. L. Stallings
Response to Welcome, Dr. Z. L. Edwards
Introduction of Guests
Entertainment
8:30 p.m. General Session
Call to Order, Dr. William L. Hand, Jr., President
Invocation
Necrology Service, Dr. C. B. Johnson, (New Bern)
Minutes of Last Meeting and Secretary-Treasurer's Report, Dr. James H. Lee
President's Address, Dr. William L. Hand, Jr.
Presentation of New Members, Dr. L. R. Turner
Nominating Committee Report, Dr. Robert H. Gilbert
Recognition of State Officers
Election of Officers

Monday, September 28

- 8:30 a.m. Registration, Governor Tryon Hotel
9:00 a.m. Dr. José E. Medina, Assistant Dean, Dental School, University of Maryland, "The Amalgam Restoration"
12:00 noon Lunch, Governor Tryon Hotel
2:00 p.m. Table Clinics
3:00 p.m. Final Business Session
Committee Reports
Report on President's Address
New Business
Installation of Officers
Adjournment
Drawing of Prizes

Fifth District Essayist

JOSÉ E. MEDINA, D.D.S.
Baltimore, Maryland



Dr. Medina is a graduate of Baltimore College of Dental Surgery, University of Maryland. Since obtaining his Doctor of Dental Surgery degree "Cum Laude" in 1948, he has excelled in the field of operative dentistry. He began as an instructor and eventually became Professor and Head of the Department of Operative Dentistry at the University of Maryland.

He is the President-Elect of the American Academy of Gold Foil Operators, and has served as a past editor of this group.

Monday, September 28

9:00 a.m.

THE AMALGAM RESTORATION

This will cover cavity preparations, bases, and insertion of the restoration.

Table Clinics

Monday, September 28

2:00 p.m.

1. **Office Emergencies**, David H. Freshwater, D.D.S. and C. C. Gooding, D.D.S., Coastal Periodontic Study Club.
2. **Preventive Dentistry**, George L. Edwards, Jr., D.D.S., Demeritt Study Club.
3. **Audio-Visual Aids in Oral Hygiene Instructions**, M. G. Delbridge, D.D.S., Eastern Prosthetic Study Club.
4. **Utilizing the Wash Impression Principle in Rubber Base Impressions**, James M. Zealy, D.D.S., Eastern Prosthetic Study Club.
5. **Immediate Root Canal Treatment**, Walter S. Linville, Jr., D.D.S., Loblolly Study Club.



“On the local level...”

Cumberland County Dental Society. For several years now this group has been sponsoring a project whereby members “adopt” lads from Boys Home at Lake Waccamaw for free dental care. Current chairman of the program is Dr. Harold E. Maxwell of Fayetteville. Society Officers are: Drs. Robert H. Gainey, president; W. J. Wiggs, vice president; and W. R. Owens, secretary-treasurer. All are from Fayetteville.

The Society is making plans for 1966 when it will be host to the annual session of the Fourth District Dental Society.

Demeritt Pedodontic Study Club. Dr. José E. Medina, professor and head of operative dentistry at the University of Maryland, was the guest clinician at the final meeting of the year in Kinston in April.

Durham-Orange County Dental Society. At its meeting in April methods and techniques of detecting oral cancer were demonstrated by Dr. Robert H. Sager of the UNC School of Dentistry faculty and Dr. John F. Bos, associate pathologist at Presbyterian Hospital in Charlotte. It was the twelfth such meeting conducted in the State through a grant to the Division of Oral Hygiene of the State Board of Health.

The visiting team described the papanicolaou smear of abnormal lesions of the mouth as a painless procedure which will ultimately save lives from cancer.

Gaston County Dental Society. Dr. W. D. Wilson is the new president of this local unit. Serving with him are: Drs. W. W. Walker, president-elect; Kenneth Taylor, vice president; and Edward H. Hagerty, secretary-treasurer. Dr. Wilson is a graduate of Davidson College and the UNC School of Dentistry.

Southeastern Dental Society. Dr. Robert H. Sager of the UNC School of Dentistry teamed with Dr. Margaret Swanton of the UNC School of Medicine to present a seminar on detection of oral cancer when this group met in May at Pine Crest Country Club. The necessity for oral examination beyond the teeth for signs of lesions was stressed and a smear technique for cancer detection was shown. It was the thirteenth such seminar conducted throughout the State under a grant to the Division of Oral Hygiene of the State Board of Health.

Tri-County Dental Society. At its May meeting the Society adopted a resolution to inform parents of the need for more stress to be placed on children's dental care during the summer months. Dr. J. B. Freedland of Charlotte lectured on endodontics.



from about the

State

Aberdeen. The offices of Drs. E. M. Medlin and C. Robert VanderVoort were broken into June 15 and robbed of a cash box containing \$15-\$18 in change, and an electric desk clock. The intruders did \$150 damage to the door and building in the process of breaking in.

Albemarle. Illness prevented Dr. C. I. Miller from attending the annual session in May. It was the first meeting he had missed in 35 years.

Dr. Carl L. Bowen was elected and installed as president of Optimist International for 1964-65 at the organization's 46th annual convention in Denver, Colorado, in June. He is the first North Carolinian to hold this office.

Burlington. Dr. George G. Patterson was named president of the Alamance County School Committeemen's Association in April.

Chapel Hill. Dr. Patricia S. Mitchell delivered the annual address to the alumnae of Meredith College on the campus in Raleigh May 30.

Dr. Clifford M. Sturdevant of the UNC School of Dentistry faculty was the guest speaker in June at

the Augusta (Georgia) Dental Society and the Hall Study Club in Gainesville, Florida.

Dr. Robert M. Nelson of the UNC School of Dentistry faculty attended a meeting of the Orthodontic Research Study Club in Florence, South Carolina in April.

Dr. John C. Brauer, dean, and Dr. James W. Bawden, assistant dean of UNC School of Dentistry, were official delegates to the 41st annual session of the American Association of Dental Schools in Los Angeles March 22-25.

Charlotte. Dr. J. B. Freedland was the visiting lecturer at a five-day postgraduate course in endodontics at the UNC School of Dentistry in June.

Dr. James E. Graham, Jr. has been named to a group studying a sheltered workshop to train handicapped Charlotteans.

Dr. Henry C. Parker conducted a two-day dental seminar at the First District Dental Society of the Alabama Dental Association in Mobile, Alabama in May.

Draper. Mrs. William Blackwell, dental assistant to Dr. Charles H. Sugg, has been named a delegate to the American Dental Assistants

Association which will meet November 9-13 in San Francisco.

Dunn. Dr. Clarence E. Roberts was elected chairman of the Harnett County Board of Health in May. He has been serving on the board for several years.

Dr. Jerry Jernigan spoke to the Dunn Rotarians on Indian Archeology in June.

Elkin. Dr. Allie H. Duncan, formerly a member of the staff of Broughton Hospital in Morganton, opened an office for private practice here in April.

Fuquay Springs. Dr. J. R. Edwards was awarded a life membership plaque by the Fuquay-Varina Chamber of Commerce in April. Dr. Edwards has been active in Chamber of Commerce work since its establishment there in 1947. This is the first award of its kind to be made by the local Chamber of Commerce.

Kannapolis. Dr. Freeman C. Slaughter was awarded a certificate of merit from Toastmasters International in March.

Kernersville. Dr. O. L. Joyner completed his 50th year of practice in the Forsyth County community in May. On June 21 he and Mrs. Joyner, the former Lucille Stafford, celebrated their 48th wedding anniversary. He has been in the same office he now occupies for 46 years. A 1913 graduate of Atlanta Dental College, he practiced in Yadkin County with Dr. Asbury Harding for a year before moving to Kernersville.

Mount Airy. Dr. Conrad L. Inman, a native of Mount Airy, received the Distinguished Alumnus Award from the Alumni Associa-

tion of the University of Maryland School of Dentistry on June 5. For several years he has been assistant professor of oral surgery at the school.

New Bern. Dr. Charles T. Barker was guest lecturer at the Norfolk Dental Study Seminar in March.

Raleigh. Dr. William J. Lee won the president's cup in a recent golf tournament at Wildwood Country Club. He won the 18-hole championship match 4 and 3. Dr. James H. Edwards won consolation honors in the same tournament.

Smithfield. Dr. William H. Oliver requested that he not be considered for reappointment to a second three-year term as a member of the Smithfield School District Committee. His term expired in April.

Winston-Salem. Six dentists have joined fourteen physicians in establishing offices at the recently completed Forsyth Medical Park on Hawthorne Road opposite Forsyth Memorial Hospital. The dentists are: J. D. Blankenbeckler, Robert W. Clinard, Paul M. Cummings, John S. Long, William G. Lynch and William G. Ware, Jr.

Forsyth Memorial Hospital Board of Trustees have adopted a resolution saying that no professionally qualified physician or dentist will be denied staff privileges at the hospital because of race, creed, or color. The board previously went on record opening the hospital to patients of all races.

Zebulon. Dr. L. M. Massey has been appointed by Governor Sanford to the Board of Trustees of the Teachers' and State Employers' Retirement System. His term will expire April 5, 1968.



General News

Judge Dismisses Suit

U. S. District Judge Wilson Warlick on June 19 dismissed a suit brought by Dr. R. A. Hawkins of Charlotte, who sought to enjoin the North Carolina Dental Society and the Second District Dental Society from barring him from membership on what he alleged were racial grounds.

Judge Warlick, in a "memorandum decision" ruled that neither the North Carolina Dental Society nor the Second District Dental Society "presently is exercising any state or federal power or is authorized to do so."

In his ruling the Judge stated that not only was there no state action involved but that Hawkins had failed to prove "any racially discriminatory act or policy of either defendant."

The plaintiff has forty days in which to file an appeal and Dr. Hawkins has said "the fight will not end here."

Dr. Hawkins filed his complaint against the Societies in March 1960. The case was heard before Judge Warlick in September 1963.

Commenting on the widespread public activities of the Society, in his final judgment Judge Warlick declared:

"It is in the public interest that

private citizens or groups or associations of private citizens express their suggestions and recommendations to governments and governmental agencies for the conduct of governmental affairs. Especially is this true where the suggestions and recommendations are made by members of a business or profession requiring specialized knowledge to a governmental agency acting in that specialized field. The volunteering of suggestions or recommendations to a governmental agency or official where the private citizen or group making the recommendation has no legal obligation or duty to do so and the governmental agency or official has no legal obligation or duty to act favorably on such suggestion or recommendation is not 'State action' on the part of the volunteering citizen or group."

Based on the evidence presented, Judge Warlick ruled that there was no racial discrimination against Dr. Hawkins because:

"There is nothing in the Constitution and Bylaws of either Dental Society which is racially discriminatory."

"Application blanks for membership have been freely furnished to any licensed dentist requesting same, regardless of his race."

"The Plaintiff has never met the

membership requirement of the Second District Dental Society that his application bear the endorsement of two members of that District Society."

"There is no competent evidence that any member of the defendant societies who refused to endorse plaintiff or any other Negro applicant for membership did so because of his race or color. Although the record shows that at least one of those who refused to endorse plaintiff's application was in the courtroom, plaintiff failed to call him as a witness."

Barden and Diercks Elected

Dr. R. B. Barden of Wilmington and Dr. C. C. Diercks of Morganton were elected members of the North Carolina State Board of Dental Examiners for a term of three years, according to Dr. J. Homer Guion of Charlotte, Secretary of the Board of Dental Elections.

Dr. Barden will be serving his second term. He is a 1950 graduate of Emory University School of Dentistry.

Dr. Diercks was graduated from Iowa University School of Dentistry in 1944. He will succeed Dr. J. Homer Guion of Charlotte, who will retire from the Board of Dental Examiners after serving three terms as its Secretary-Treasurer.

The 1964 House of Delegates took note of Dr. Guion's retirement and paid special tribute to him by adopting a resolution which commended him "for his untiring efforts in serving as Secretary of the North Carolina State Board of Dental Examiners for the past nine years. He has not only given of his time and talent for the betterment of the profession in the State, but

has always devotedly protected the public's interest in the performance of the duties of his office."

73 Dentists Licensed

Seventy-three dentists and 19 hygienists were licensed to practice in North Carolina as a result of examinations given in Chapel Hill the week of June 22. Announcement of the successful applicants was released by the North Carolina State Board of Dental Examiners following its meeting in Raleigh, July 11-12.

The Board examined 89 applicants in dentistry and 22 applicants in dental hygiene.

At its Raleigh meeting the Board elected Dr. R. B. Barden of Wilmington, president, and Dr. C. C. Diercks of Morganton, secretary-treasurer, for the coming year. Dr. Barden will be serving his second term on the Board and Dr. Diercks his first.

Dentists licensed were:

W. D. Abbey, Jr., Columbus, Ohio; G. W. Allen, Fountain Inn, S. C.; W. C. Anderson, Kinston; C. N. A. Avera, Rocky Mount; J. C. Bishop, Jr., Fort Riley, Kansas; A. B. Bottoms, Canton; R. K. Bowling, Richards-Begaur AFB, Missouri; J. W. Bradshaw, Jr., Relief; T. E. Butler, Chapel Hill; J. H. Camp, Chapel Hill; A. H. Cash, Jr., Hopewell, Va.; W. P. Cave, Morgantown, West Virginia; R. D. Coffey, Jr., Morganton; J. L. Corbin, Randleman; D. U. Cregar, Jr., Greensboro.

J. R. Dunn, Roanoke Rapids; D. M. Erickson, Chapel Hill; R. L. Farquhar, Moenssen, Penn.; R. D. Garren, Asheville; T. B. Garrett, II, Virginia Beach, Va.; D. R. Goodwin, Chapel Hill; R. O. Hawkins, Jr.,

Chapel Hill; C. A. Higgins, Burnsville; B. P. Hill, El Paso, Texas; Allen Holmes, Jersey City, N. J.; W. B. Honeycutt, Gastonia; T. J. Horton, Chapel Hill; J. T. Howard, Falls Church, Va.; S. R. Hudson, Wilkesboro; Deane Hundley, III, Wallace.

Abraham Johnson, Henderson; G. T. Johnson, Sparta; L. G. Jorgensen, Greenville; R. R. Keen, Ft. Riley, Kansas; J. E. Kendall, Chapel Hill; H. E. Killian, Chapel Hill; L. T. Lineberger, Gastonia; D. J. McGowan, Albany, Georgia; S. C. Marks, Jr., Chapel Hill; J. L. Matney, Danville, Va.; F. H. Miller, Ahoskie; R. R. Milligan, Fayetteville; H. W. Mohorn, Chapel Hill; R. B. Moore, Lexington; E. B. Morgan, Jr., Decatur, Georgia; T. L. Morton, Candler; M. H. Murphy, Belmont.

J. U. Newman, III, Burlington; C. F. Osborn, Hendersonville; J. R. Owings, Jr., Greenville, S. C.; G. A. Page, Yanceyville; D. R. Patrick, Greenville; J. B. Phillips, Chattanooga, Tenn.; K. R. Phillips, Winston-Salem; L. O. Posey, Chapel Hill; J. A. Privette, Kenly; E. A. Rider, Rochester, New York; D. A. Roberts, Candler; R. J. Rogers, Jr., Matthews.

M. D. Samuel, High Point; T. W. Slaughter, New York, N. Y.; C. B. Smith, Jr., Virginia Beach, Va.; L. H. Smith, Liberty; T. K. Smith, Thomasville; C. M. Stamper, Misenheimer; D. E. Trawick, Bryson City; T. R. Vaughan, Jr., Rocky Mount; J. W. Walker, Burlington; G. M. Wallace, High Point; G. T. Ward, Asheville; B. J. Watson, Morganston; S. L. Woody, Bessemer City; B. G. Wooten, Yadkinville.

Dental Hygienists licensed were: Melba R. Anderson, Raleigh;

Mary B. Ansell, Chapel Hill; Charlotte O. Berry, Goldsboro; Maxine B. Braxton, Snow Camp; Karen S. Drizen, Huntingdon Valley, Pa.; Sidney H. Ginn, Charlotte; Barbara Groom, Greenville, S. C.; Nena L. James, Mebane; Priscilla R. Levine, Jacksonville; Jeanne H. Mills, Oxon Hill, Maryland; Gael T. Murray, Chapel Hill.

Mary A. Olsen, Hendersonville; Judy C. Pender, Mebane; Martena S. Poteat, Asheville; Nancy V. Ramsey, Kinston; Margaret S. Stanford, Englewood, Florida; Anne S. Whitley, Chapel Hill; Sandra D. Williams, Rutherfordton; Sandra L. Willis, Shelby.

Dental Care for the Aged

A new medical care plan for aged persons not on welfare relief was put into effect July 1 by the State Board of Public Welfare. It embodies part of the Kerr-Mills Act and was authorized by the 1963 General Assembly.

Services to be provided for persons 65 years or older include dental care, hospital in-patient care, and hospital out-patient care. R. Eugene Brown, Commissioner of Welfare, said it is anticipated that a drug program will go into effect October 1.

Initially the dental care program will be limited to the following services: emergency treatment (palliative), extractions, amalgam fillings, and repairs to dentures.

The estimated cost of the program for the 1964-65 fiscal year is \$2,507,000. Of this amount 75 per cent, or \$1,880,000, will be in federal funds. The State will provide \$313,380, or 12½ per cent, and the counties will provide a similar amount.

A total of \$519,000 has been allocated for dental care.

In a letter to all dentists in the State on June 19, the Board of Public Welfare requested that a "Statement of Intent" be submitted by the individual dentists. The letter pointed out that agreement to participate in the Medical Assistance for the Aged program did not obligate the dentist to disrupt his normal practice in any way, but that eligible recipients would be scheduled for appointments just as other patients are. However, the letter emphasized that authorization for services by the county director of public welfare was necessary.

The 1964 House of Delegates adopted a resolution encouraging North Carolina dentists to participate in the program of dental care for the aged.

Dr. Henry O. Lineberger, Jr., Chairman, Dental Care for the Aged Committee, has urged dentists to return their "Statement of Intent" promptly.

Industrial Commission Claims

Dentists filing claims with the Industrial Commission for treatment of cases under the Workmen's Compensation Act must use the 1964 fee schedule. Failure to do so will delay payment.

The Industrial Commission has no special bill form for use by dentists. Therefore, if it is not practical to use the standard I. C. Form No. 25, the Commission suggests that the dentist submit a fully itemized statement of services rendered on his own letterhead or bill form and attach it to the I.C. Form No. 25. The latter should be signed at the place indicated.

The regulations provide that a dentist should charge for each service rendered the charge he customarily makes for the same service to the public generally, but not to exceed those set forth in the current fee schedule.

Copies of the 1964 dental fee schedule for Workmen's Compensation cases are available from the Central Office. Form No. 25 may be obtained from the North Carolina Industrial Commission, Raleigh.

Editor's Workshop

District editors met with JOURNAL staff members for a workshop on problems related to the editing and publishing the JOURNAL in the Central Office in Raleigh June 29.

Responsibilities and duties of district editors, photography, editorial and advertising policies were among the topics discussed.

A report on the Science Writing Seminar conducted at Ohio State University in Columbus, Ohio was presented by Editor-Publisher Barry G. Miller of Charlotte.

District editors attending the half-day workshop were: William G. Ware, Jr., Winston-Salem, Second District; Richard M. Fields, Pleasant Garden, Third District; Paul Fitzgerald, Jr., Raleigh, Fourth District; William G. Gilbert, Jr., New Bern, Fifth District.

Others in attendance, besides the Editor-Publisher included: M. Lamar Dorton, Statesville, Associate Editor-Publisher; J. Ernest Roberts, Photographic Editor; Miss Peggy Lassiter, Charlotte, Secretary to Dr. Miller; Miss Mira Riddle, Central Office Secretary; and Andrew M. Cunningham, Executive Secretary.

First Dental Lab Class Graduates

The Durham Industrial Education Center graduated its first class of dental laboratory technicians May 19. The commencement address was made by Dr. John C. Brauer, Dean, UNC School of Dentistry, and diplomas were awarded by Robert L. Lyon, Chairman, of the Education Center's board of directors, to eight technicians, including: Osborne Lionel Bridgeford, John D. Goodwyn, Jr., Gerald S. Reeves, Howard E. Stone, Jr., all of Durham; Victor E. Euliss, Graham; Douglas P. Lybrand, Hillsboro; Roger D. Mynatt, Chattanooga, Tenn.; and William F. Riddle, Weaverville.

The Center's two-year program began in September 1962 and was fully accredited by the A.D.A. Council on Dental Education in March 1964, the fifth in the nation to receive such recognition and the only one in the South.

In approving the program at Durham, the A.D.A. Council on Dental Education cited it as having "the distinct possibility . . . of becoming a modern prototype for future dental laboratory technology programs."

Hygienists Organize Study Club

Miss Mary Sutherland, New Bern, was elected president and Miss Nancy Jo Traylor, New Bern, was named secretary-treasurer of the Southeastern North Carolina Dental Hygiene Study Club at its June meeting in Kinston.

The club was organized in November 1963. Charter members in

addition to Miss Sutherland and Miss Taylor were: Mrs. Linda Edwards Smith, Pink Hill; Mrs. Barbara Blanton Ramsay, Kinston; Mrs. Linda Clark Campbell, Goldsboro; Miss Judy Harwood, Kinston; Miss Judy Ellis, Mount Olive; and Mrs. Marian Melvin Stephenson, Kinston.

N. C. Tops Relief Quota

North Carolina dentists by May 31 had contributed \$1,856 to the American Dental Association Relief Fund, 107.3 per cent of the assigned quota of \$1,730. The 1964 campaign ends June 30.

One-half of the total contributions by Tar Heels (\$928) will be returned to the Relief Fund of the North Carolina Dental Society. The Society will in all probability qualify for a bonus payment of \$464, which means the N.C.D.S. Relief Fund could receive as much as \$1,392 from the A.D.A.

Bonus payments of one-quarter of the total amount contributed by members of a constituent society to the A.D.A. Relief Fund are permitted, provided in the previous year: (1) the society met its assigned quota; and (2) the society paid out in grants a sum greater than was received as a refund from the A.D.A.

Auxiliary Gives Scholarship

The Fifth District of the North Carolina Dental Auxiliary awarded a \$300 scholarship to Miss Joy Duncan of Cove City to attend the Dental Assistants Education Program at the UNC School of Dentistry.

Joy is the daughter of Mr. and Mrs. Ed Duncan of Route 1, Cove

City. She was graduated from Farm Life High School in Vanceboro where she was vice president of her class. She began her training at Chapel Hill June 4.

UNC Gets New Grants

The UNC School of Dentistry will share in a grant and a loan fund appropriation from the American Fund for Dental Education.

Dean John C. Brauer said that a \$1,000 grant to help upgrade dental education will be used to recruit students for dentistry and associated dental fields.

Based on student enrollment, the school will also receive about \$500 for its student loan fund. This will be matched with federal funds and will make some \$5,000 available to help meet the needs of students, according to Brauer.

The allocations were made by the AFDE at its meeting in New York in May, when Dean Brauer was one of three new directors elected to the AFDE board.

Fluoride for Gastonia

In a surprise move that took only a few minutes, the Gastonia City Council voted June 16 to fluoridate the city's water supply.

It was the second time the council had taken such action. The first time was in 1955, but the fluoridation program was halted after months of bitter controversy.

The council had discussed the latest fluoridation move privately, but the fast action at the June 16 meeting was the first public knowledge that the step was to be taken.

City Manager Tom Ipock said

that fluoridation will begin as soon as the city can meet state requirements and install the equipment.

In its editorial column the *Gastonia Gazette* commented: "The return of fluoride to Gastonia's water supply, to take place some time in the near future, has brought few dissenting voices. This is as it should be."

Residents of Dallas and Lowell will benefit from Gastonia's action, since both towns buy water from Gastonia.

And in Lincolnton, everything was in readiness the latter part of June for its fluoridation program to become operative.

Community Health Week

District and local dental societies are urged to join with local medical societies in planning a program for Community Health Week October 18-24, according to Dr. W. L. Hand, Jr., Chairman, Council on Dental Health.

The purpose of Community Health Week is to evoke an awareness and appreciation among the public of the community's health facilities and health services, particularly those developed over the years through co-operative civic and professional action.

The American Medical Association has invited the allied national health organizations to encourage constituent, component, and local societies to join forces with the medical profession in dramatizing convincingly the indispensability of good health care to good community living. Since dental care is an important part of total health care, organized dentistry at all levels will

have an opportunity to demonstrate its interest in the health of the community by participating in this observance.

A.D.A. Issues Statements

The A.D.A. Council on Dental Health at its meeting April 30-May 1 issued the following statements relative to dental prepayment plans and administrative services for dental service corporations:

Dental Prepayment Plans

"The Council on Dental Health has been made strongly aware of an increasing attack on dental service corporations and, accordingly, makes the following statement so that constituent societies and their dental service corporations may be advised of the position of the Council.

"The present policy of the Association is to urge all constituent societies to establish dental service corporations so that this instrument will be available to the public if and when there is a group demand for dental health services. The Association also takes the position that at this stage of development of dental prepayment programs, advantage should be taken of every feasible mechanism in order to make dental health services available on a group basis. The Association, therefore, considers prepayment programs underwritten by responsible insurance companies as one of the proper alternatives in the selection of a dental prepayment program. The dental society and the group must weigh for themselves the advantages of the not-for-profit, professionally sponsored dental service corporations against the services

which can be provided through responsible insurance companies.

"The Council does not believe this selection of program should be influenced by the use of promotional methods which are considered unethical even in the market place. The Council does not believe promotional methods should include unfounded and misleading charges against the alternate program. The Council believes that such promotion is inimical to the best interests of the public and of the dental profession."

Administrative Services For Dental Service Corporations

"Dental service corporations, either because of the present stage of their development or because of limited size and facilities, may find it desirable to seek assistance in handling their administrative, actuarial and fiscal problems. When the determination is made that such services are needed, the Council on Dental Health recommends that, when possible, preferential consideration should be given to the selection of an agency which is organized on a not-for-profit basis and which has adequate professional sponsorship. Alternate consideration may be given, when desired, to the selection of a commercially sponsored agency established on a normal profit basis."

The Council also recommended the establishment of an independent national co-ordinating agency for dental service corporations and scheduled a special meeting of the Council in June to finalize the proposal to be transmitted to the Board of Trustees and House of Delegates for consideration at the 1964 annual session.

Classified Advertising

RATES: \$3.00 for 30 words or less; additional words 5¢ each. Remittance must accompany order. Deadline for accepting ads is first of month preceding month of publication. Send orders to: THE JOURNAL OF THE NORTH CAROLINA DENTAL SOCIETY, Box 11065, Raleigh, N. C. 27604.

FOR SALE: Bogen Individual Intercom Phone System; Argus 300 35mm slide projector; 2 Phillips X-ray, tested and standardized by State Board of Health for minimum radiation hazard; 2 Ritter H. Units, 4 years old; Pelton & Crane air compressor; Pelton & Crane Individual Unit Vacuum System. Barry G. Miller, 1529 Elizabeth Ave., Charlotte, N. C.

RARE OPPORTUNITY. Dental office building, modern and fully equipped. Two chairs. Immediate occupancy. Sole practice in community near Asheville. Owner leaving state to specialize. Contact Robert D. Lewis, attorney, Jackson Building, Asheville.

Dental Research Center Gets Two Projects

Two major research projects for the Dental Research Center at the University of North Carolina have been approved by the National Institute of Mental Research under grants totalling \$302,000.

The million dollar research center building on the UNC campus is expected to enter the construction stage this summer. The completion date is late 1965 or early 1966.

Dr. Andrew D. Dixon has received an individual grant of \$230,000 for a five-year period to study normal and injured nerve cells and fibers of the face, mouth, and teeth. The initial payment of \$70,000 under this grant will establish an electron microscopy laboratory.

Dr. Donald Warren was awarded a three-year \$72,000 grant for research related to cleft palates and the evaluation of results of dental and surgical procedures performed on cleft palate patients.

Until the new research center is completed the research will be con-

ducted in temporary quarters in the dental and medical school buildings.

Obituaries

Dr. George J. Evans, 76, of Asheville, a former member of the First District Dental Society until he retired from active practice several years ago, died June 22, 1964.

Dr. Paisley Fields, 74, of Fairmont, a life member of the Fourth District Dental Society, the North Carolina Dental Society, and the American Dental Association, died April 23, 1964.

Dr. Chauncey Highsmith, 83, of Gastonia, a life member of the First District Dental Society, the North Carolina Dental Society, and the American Dental Association, died June 3, 1964.

Dr. Walter E. Neal, 49, of Liberty, a member of the Third District Dental Society, died April 16, 1964.

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THE

Journal

OF THE NORTH CAROLINA DENTAL SOCIETY

SEPTEMBER, 1964



VOL. 47, NO.

Transactions 1963-1964

NOTE

The Roster of Members will be published as a supplement to the January 1965 issue.

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THE JOURNAL
of the
North Carolina Dental Society

A Constituent of the American Dental Association

Containing the
TRANSACTIONS
of the
108th ANNUAL SESSION

at

THE CAROLINA — PINEHURST, NORTH CAROLINA

May 10-13, 1964

VOLUME 47

SEPTEMBER, 1964

NUMBER 4

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Associate Editor-Publisher: M. Lamar Dorton, D.D.S.....Statesville
Photographic Editor: J. Ernest Roberts, D.D.S.....Burlington
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SPEAKER OF THE HOUSE

RALPH D. COFFEY, D.D.S.....	Morganton
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Report of the President

S. BYRON TOWLER, D.D.S.
Raleigh

Mr. Vice President, fellow members of the North Carolina Dental Society, distinguished guests, ladies and gentlemen:

I am happy to welcome you who are in Pinehurst for the 108th Annual Session of the North Carolina Dental Society.

I take personal pride in welcoming my graduation class who have honored me by being here tonight.

It has been my happy privilege to serve the Society as your Secretary-Treasurer, President-Elect and President. The challenges of these offices have been rewarding, and I consider it a personal and professional honor.

In keeping with precedent and tradition, it is customary as President to make a few remarks. There have been many important events in which I have been privileged to participate as your representative.

Dentistry has made rapid strides in the last few years. Its progress in North Carolina has been wonderful. I am persuaded, yes, convinced, that some of these accomplishments and forward movements are due to the high ethical standards which dentistry in our State has insisted upon. The unusual integrity of the membership as a whole, their appreciation and love for their fellowman, the mutual respect and friendship existing among the dentists, and the cordial relationship between the medical and dental professions have contributed to the present status of the profession.

I will not make any recommendations or resolutions. I prefer leaving this responsibility to the House of Delegates. I am confident the House will consider the problems and take the proper action on the resolutions recommended by the committees.

The Industrial Commission: Immediately after assuming office, I felt the need for a review of the services and the fee schedule for the treatment of cases subject to the provisions of the North Carolina Workman's Compensation Act.

This is a program that every licensed dentist in North Carolina is eligible to participate in. A special committee was appointed to review and study the services and the fee schedule which had been in effect since 1958.

I am pleased to report to you that a new fee schedule was issued in January 1964. In it you will find that many services were added, and substantial increases in fees were provided in most segments.

Resignation of Editor-Publisher: The members of the North Carolina Dental Society will long remember Dr. Clint Diercks for the valuable service he rendered the profession as Editor-Publisher of the Journal from 1959 to 1963. He served with diligence and high ethical standards. His resignation was accepted with regret by the Executive Committee.

Dr. Barry G. Miller was appointed to succeed Dr. Diercks as Editor-Publisher. Dr. M. Lamar Dorton was named Associate Editor. Both men are well qualified for this responsibility, and I commend them to the membership.

Emergency Dental Service: I feel it timely that Committees for emergency dental service be appointed on local levels to survey the facilities for dental care in all communities and "take any necessary steps to assure that dental service is available to any person faced with a dental emergency, regardless of the hour of the day or the day of the week," that this service may be needed.

Dental Hygienists: At the final session of the 1963 House of Delegates many delegates expressed concern over the evident shortage of dental hygienists in North Carolina. I appointed a special committee to make a study of the dental hygienist situation in the State and report its findings to the 1964 House of Delegates.

This committee made a thorough study and found in North Carolina the need for dental hygienists is growing proportionately as more and more dentists and the public come to better appreciate the value and proper use of their services.

I can assure you that after the members of the House of Delegates have considered the findings of this committee, and if they deem it advisable, they will activate a program to expedite the training of dental hygienists.

Dental Technicians: Since we last met another notch has been cut in dental history. For the first time in the life of our State a class in Dental Technology will graduate in June.

I had the pleasure of lecturing to the second year students in the Dental Laboratory Technology School at Durham, on "The Status of the Dental Laboratory Technician in Relation to the Dentist."

I sincerely believe this school will do much to make it possible for the dentists of our State to increase their productivity, and hence their capacity to serve more people.

Laboratory Accreditation: A nation-wide voluntary accreditation program of dental laboratories will get under way in 1964. Its purpose is to "promote an accreditation program which will assist the dental profession in its continuing efforts to improve quality and efficiency of dentists' services to the public."

The American Dental Association and the Joint Commission on Accreditation of Dental Laboratories are asking individual dentists to encourage their dental laboratories to take an interest in accreditation.

If you are asked to serve as a surveyor in this program, I hope you will give the matter careful consideration, and feel it an honor and a privilege.

Council on Dental Health and Information: Realizing the problems facing our profession relative to the future of dental manpower in our State, the 1963 House of Delegates directed the president to assign to the proper committee the responsibility of co-ordinating and implementing a Careers in Dentistry Program. I delegated this responsibility to the Council on Dental Health and Information. In a relatively short time the Committee has made rapid progress.

Through the media of the *Newsletter*, *THE JOURNAL OF THE NORTH CAROLINA DENTAL SOCIETY*, and the District Officers' Conference, the problems, the opportunities, and the need for action have been presented to the dentists of the State.

An exhibit "Careers In Dentistry" has been prepared by the Central Office. This exhibit was displayed at the Health Fair at Duke Indoor Stadium, April 1-4. The exhibit was also displayed at "Career Week" in Raleigh Memorial Auditorium April 6-8. The exhibit will be on display at all District Meetings this coming fall and at Career Congress Meetings during the next year.

To further stimulate and guide young people, a Dental Career Day was held at the School of Dentistry in Chapel Hill on April 25.

Division of Oral Hygiene: Another thing for which I feel we should be grateful is that we have had in this State a dental public health program which has succeeded in no small way in making our children and mothers-to-be conscious of the importance of dental health and, therefore, more appreciative of the values of good dentistry. It might be enlightening to some of us to realize just how large a budget the Division of Oral Hygiene of our State Board of Health spends each year in this educational endeavor — approximately \$360,257.00. This expenditure and effort, as you know, is in the name and cause of public health, but, after all is said and done, we, the practitioners of the State, are among the beneficiaries. In the long run, dentistry will profit more from a program directed toward motivating people to accept personal responsibility for their own and their children's dental health than from one in which people are encouraged to depend on public funds to relieve them of such a responsibility. For this reason alone, if for no other, I believe we should do everything possible to encourage our established and tested program, and to lend our aid in the securing of an adequate staff for this work.

The dental health matter which is in the limelight is fluoridation. This has attracted the attention of the lay public to a greater extent, perhaps, than any other single public health measure. As of December 31, 1963, there were 45 towns in North Carolina using fluoridated water and serving a population of 1,226,482 representing a gain of six communities and a gain of 26,000 population in one year.

Litigation: The Hawkins case was tried in Charlotte on September 9 and 10, 1963, before Federal District Judge Wilson Warlick, without a jury. At the conclusion of the testimony, Judge Warlick reserved judgment. He requested counsel for each party to submit proposed findings of fact and conclusions of law within 30 days after their receipt of a copy of the transcript of the testimony. That transcript was delivered by the Court Reporter on January 11, 1964.

Because of the tardy filing of proposed findings of fact and conclusions of law by counsel for plaintiff, and because a brief was filed by counsel for plaintiff, the last brief in the case was filed on April 24, 1964. A decision is expected at any time.

A.D.A. Fifth District: The constituent delegations of the Fifth Trustee District of the American Dental Association, meeting in caucus at At-

lantic City, New Jersey, October 16, 1963, approved a manual of procedure for the Fifth Trustee District Organization.

The objects of this organization are: (1) To organize the seven states and to disseminate information concerning the business affairs that will be considered by the House of Delegates of the American Dental Association in such a manner that all delegates shall be completely informed. (2) To strengthen the position of the Fifth Trustee District in national affairs on all matters pertaining to the dental health and welfare of our people.

Proposed Revision of American Dental Association Districts: A special committee was appointed by the President of the American Dental Association to review the present organization of the trustee districts. This committee has proposed that six of the current districts remain unchanged, seven be revised, and two new districts be created. I asked Dr. Paul E. Jones and Dr. Clyde Minges to study this proposal. They are of the opinion that North Carolina would benefit greatly by the proposal, and that it would add considerably to the advancement of the profession and the development of dentistry in the area of the Fifth District. Further, they feel that we will be better served by this new arrangement.

Central Office: In 1955, the need for an Executive Secretary and a Central Office was realized. Mounting activity in all areas of Society affairs have more than justified this forward step in the growth of the Society.

I commend Dr. L. D. Herring, and his hard-working Annual Session Committee, for their loyal and efficient work in making this meeting a social pleasure for you, and for planning a scientific program which provides "education beyond the usual level for the advancement of dentistry."

It has been a privilege to work with the officers, the members of the Executive Committee, our 17 Standing Committees, 18 Special Committees, our Executive Secretary, Mr. Andrew M. Cunningham, Mrs. Cunningham, and Office Secretary, Miss Mira Riddle. To them I extend my special thanks and grateful appreciation for their excellent cooperation. They gave generously of their time, and often made personal sacrifices in the interest of the Society.

Conclusion: The success of this year in my opinion, has been a continuation of the glorious 108 years that have gone before. Its growth and success go to the members at large, their leadership, and a desire to render unselfish service as committee members and chairmen when called upon.

It has been a very rewarding year for me, and if I have contributed to the future policies and plans that will continue the sound objectives of our Society, then I am repayed for the confidence and trust you placed in me.

I will not be stepping down tonight, but instead, I pledge to you my continued efforts to further the progress of dentistry.

If I may be personal for a final moment, I would like to express to my wife, Edythe, my appreciation for her generous understanding and co-operation during my term of office.

Report of the Secretary- Treasurer

DENNIS S. COOK, D.D.S.
Lenoir

NORTH CAROLINA DENTAL SOCIETY AUDIT FOR FISCAL YEAR ENDED MAY 31, 1964

Greensboro, North Carolina
June 25, 1964

The Officers and Directors
North Carolina Dental Society
Raleigh, North Carolina

Gentlemen:

I have examined the books and records of the North Carolina Dental Society for the fiscal year ended May 31, 1964. My report, consisting of balance sheets and statements of receipts and disbursements for the General Fund, the Relief Fund, and the Development Fund, together with supporting schedules, is submitted herewith.

Cash in banks and savings accounts in savings and loan association have been confirmed by the depository institutions. U. S. Treasury Bonds in a safe deposit box in the First-Citizens Bank and Trust Company, Raleigh, North Carolina have been certified to me by joint letter of Dr. S. Byron Towler and your Executive Secretary. Recorded receipts have been traced into the bank. Cancelled checks and paid invoices have been examined and found in order and reasonably classified.

Inasmuch as the records are maintained on the cash basis, members' arrears and liabilities, if any, are not reflected in the balance sheet.

Respectfully submitted,

LOUIS N. HAND, JR.
Certified Public Accountant

BALANCE SHEET—GENERAL FUND

May 31, 1964

ASSETS

Cash in Bank—Exhibit B.....	\$ 21,281.15
Savings Account—First Federal Savings and Loan Association, Durham, N. C.....	8,939.27
Savings Account—First-Citizens Bank & Trust Co.....	6,165.93
Savings Account—Raleigh Savings and Loan Association.....	9,093.37
U. S. Treasury Bonds (Maturity Value \$2,300.00)—at Cost— Schedule 1	1,662.00
	<u>\$ 47,141.72</u>

SURPLUS

Surplus:

Appropriated Surplus	
Reserve for Library and History Committee.....	\$ 1,600.00
Surplus Available for Appropriation	
Balance, May 31, 1963.....	\$ 37,782.74

ADD:

Receipts in Excess of Disbursements (Exhibit A-1)	7,758.98
--	----------

Balance, May 31, 1964.....	45,541.72
	<u>\$ 47,141.72</u>

Exhibit A-1

ANALYSIS OF CHANGE IN SURPLUS—GENERAL FUND

For the Fiscal Year Ended May 31, 1964

Revenue Receipts for 1963-64.....	\$ 98,945.70
Expenditure Disbursements:	
Total Disbursements	\$103,935.23
LESS: Non-Expense Payments	
Transfer of Funds.....	12,748.51
Net Expenditures	91,186.72
Receipts Over Expenditures (Exhibit A).....	<u>\$ 7,758.98</u>

Exhibit B

STATEMENT OF RECEIPTS AND DISBURSEMENTS—
GENERAL FUND

For the Year Ended May 31, 1964

Bank Balance, June 1, 1963.....\$ 26,270.68

Receipts:

Dues	\$ 86,688.00	
Annual Session	7,607.51	
JOURNAL	3,723.35	
Expense Reimbursements	64.11	
Savings and Loan Dividends and Bank Interest	748.51	
Sales—Dental Formulary	30.00	
Insurance Dividend	4.22	
Returned Check Re-deposited.....	80.00	98,945.70
		<hr/>
		\$125,216.38

Disbursements:

Dues Remitted:

American Dental Association..\$	42,526.50	
A.D.A. Relief Fund.....	1,227.00	
First District	1,394.00	
Second District	1,375.00	
Third District	1,245.00	
Fourth District	865.00	
Fifth District	590.00	
Refunds and Adjustment.....	109.50	
Returned Checks	80.00	\$ 49,412.00
	<hr/>	

Administrative Expenses:

Salary—Executive Secretary ..\$	9,000.00	
Assistant	4,000.00	
Other	1,503.90	
Social Security	376.31	
Office Rent	1,500.00	
Utilities	547.60	
Office Supplies	805.94	
Travel—Executive Secretary ..	1,246.70	
Telephone	636.32	
Postage	725.66	
Insurance	199.47	
Clipping Service	120.00	
Repairs and Maintenance.....	432.45	
Miscellaneous	15.83	21,110.18
	<hr/>	

Publications:

JOURNAL	\$ 4,503.86	
Transactions and Directory.....	2,021.37	
Newsletter	220.25	6,745.48
	<hr/>	

Committees:

Children's Dental Health.....\$	425.75	
Dental Health and Information....	471.77	
Library and History.....	69.70	
Dental Service Corporation.....	65.00	1,032.22
	<hr/>	

Annual Session (Schedule 2).....	\$ 6,978.66
Legal Counsel	3,335.07

Other:

Returned Checks	\$ 83.00	
Dental Foundation	80.00	
Bank Charges	7.90	
Audit	150.00	
District Officers Conference.....	69.26	
Memberships	15.00	
City and County Taxes.....	85.08	
Re-invested Dividends & Interest	748.51	
Miscellaneous	90.00	
Office Furniture & Equipment..	1,847.64	
Printing Code of Ethics.....	145.23	
Deposits to Savings Accounts.....	12,000.00	15,321.62

Total Disbursements\$103,935.23

Bank Balance—May 31, 1964 (To Exhibit A).....\$ 21,281.15

Schedule 1

U. S. TREASURY BONDS—GENERAL FUND

May 31, 1964

SERIAL NUMBER	DATE ACQUIRED	COST	MATURITY VALUE	MATURITY DATE
C40545J	Jan. 54	\$ 74.00	\$ 100.00	Jan. 66
C40546J	Jan. 54	74.00	100.00	Jan. 66
C40547J	Jan. 54	74.00	100.00	Jan. 66
Q22367J	Jan. 56	18.00	25.00	Jan. 68
C168915J	Jan. 56	72.00	100.00	Jan. 68
C168916J	Jan. 56	72.00	100.00	Jan. 68
C168917J	Jan. 56	72.00	100.00	Jan. 68
Q60612J	Nov. 56	18.00	25.00	Nov. 68
Q60613J	Nov. 56	18.00	25.00	Nov. 68
Q60614J	Nov. 56	18.00	25.00	Nov. 68
C169985J	Nov. 56	72.00	100.00	Nov. 68
D22068J	Nov. 56	360.00	500.00	Nov. 68
M178508J	Nov. 56	720.00	1,000.00	Nov. 68
		<u>\$1,662.00</u>	<u>\$2,300.00</u>	

(Exhibit A)

Schedule 2

1964 ANNUAL SESSION EXPENSES

Arrangements Committee

Stenotypist	\$	808.11	
Housing		75.00	
January Meeting		69.61	
Registration		290.93	
Presentations		118.76	
Transportation, gratuities, meals and insurance		204.19	
Hand Programs		293.00	
Sound System		157.50	
Signs		122.30	
Miscellaneous Supplies		67.62	
Projectionist, projector rental.....		45.82	
Staff—Hotel Expense		171.96	
Coffee Breaks		64.93	\$ 2,489.73

Exhibits Committee

Prizes	\$	333.56	
Refunds		42.50	
Social Hour		182.95	
Exhibit Space		500.00	
Decorator		712.00	
Scientific Exhibits		12.00	
Printing		25.08	
Gratuities		20.00	1,828.09

Entertainment Committee

Dance	\$	210.00	
Entertainment		505.00	
Banquet		50.00	
Flowers		60.62	825.62

Necrology Committee 75.00

Program Committee 1,169.87

Hospitality Committee 185.31

Publicity Committee 173.10

Clinic Committee 19.37

Sports Committee 32.92

Visual Education Committee..... 4.50

House of Delegates..... 175.15

Total Annual Session Expense.....\$ 6,978.66

Exhibit C

BALANCE SHEET—RELIEF FUND

May 31, 1964

ASSETS

Cash in Bank—(Exhibit D).....	\$ 2,423.38
First-Citizens Bank & Trust Co.—Savings Account.....	5,761.25
Investment—First Federal Savings and Loan Association, Durham, North Carolina.....	8,618.98
U. S. Treasury Bonds—Series F—Maturity Value \$9,825.00— at cost—(Schedule 3).....	7,185.00
	<u>\$ 23,988.61</u>

LIABILITIES

Fund Balance:	
June 1, 1963, Balance.....	\$ 22,653.59
ADD: Receipts in Excess of Expense Disbursements..... (Exhibit D)	1,335.02
	<u>\$ 23,988.61</u>

Exhibit D

RELIEF FUND

STATEMENT OF RECEIPTS AND DISBURSEMENTS

For the Fiscal Year Ended May 31, 1964

June 1, 1963—Balance—North Carolina National Bank.....	\$ 4,129.97
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Receipts:

Scrap Amalgam	\$ 2,233.41
A.D.A. Share Christmas Seal Receipts.....	1,012.00
A.D.A. Bonus	506.00
Savings and Loan Dividends.....	334.69
Bank Savings Interest.....	188.92
A.D.A. Refund	52.50
	<u>\$ 4,327.52</u>

Disbursements:

A.D.A. Special Relief Fund.....	\$ 2,992.50
Receipts in Excess of Expense Disbursements..... (Exhibit C)	\$ 1,335.02
	<u>\$ 5,464.99</u>

Funds Transferred: Savings and Loan and Bank Savings Accounts.....	3,041.61
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May 31, 1964—Balance—North Carolina National Bank.....	\$ 2,423.38
	<u>(Exhibit C)</u>

Schedule 3

U. S. TREASURY BONDS—RELIEF FUND

May 31, 1964

SERIAL NUMBER	DATE ACQUIRED	COST	MATURITY VALUE	MATURITY DATE
V11338J	Jan. 54	\$3,700.00	\$5,000.00	Jan. 66
D18386J	Jan. 54	370.00	500.00	Jan. 66
Q17164J	Jan. 54	18.50	25.00	Jan. 66
Q17165J	Jan. 54	18.50	25.00	Jan. 66
M173548J	May 55	720.00	1,000.00	May 67
C153116J	May 55	72.00	100.00	May 67
C153117J	May 55	72.00	100.00	May 67
C153118J	May 55	72.00	100.00	May 67
C153119J	May 55	72.00	100.00	May 67
M198562J	Dec. 55	720.00	1,000.00	Dec. 67
C206330J	Dec. 55	72.00	100.00	Dec. 67
C206331J	Dec. 55	72.00	100.00	Dec. 67
C206332J	Dec. 55	72.00	100.00	Dec. 67
Q73231J	Dec. 55	18.00	25.00	Dec. 67
Q73232J	Dec. 55	18.00	25.00	Dec. 67
Q73233J	Dec. 55	18.00	25.00	Dec. 67
D22067J	Nov. 56	360.00	500.00	Nov. 68
M178507J	Nov. 56	720.00	1,000.00	Nov. 68
		<u>\$7,185.00</u>	<u>\$9,825.00</u>	

(Exhibit C)

Exhibit E

BALANCE SHEET—DEVELOPMENT FUND

May 31, 1964

ASSETS

Savings Account—First Federal Savings and Loan Association..\$ 4,151.21

LIABILITIES

Fund Balance—For Permanent Improvements

June 1, 1963 Balance.....\$ 3,990.01

ADD: Receipts over Disbursements for the year..... 161.20

May 31, 1964, Balance.....\$ 4,151.21

Exhibit F

RECEIPTS AND DISBURSEMENTS—DEVELOPMENT FUND

For the Year Ended May 31, 1964

June 1, 1963—Balance, First Federal Savings and Loan
Association, Durham, N. C.....\$ 3,990.01

Receipts:

Dividends Received—Savings and Loan Account..... 161.20
\$ 4,151.21

Disbursements: None

May 31, 1964—Balance—First Federal Savings and Loan
Association, Durham, N. C.....\$ 4,151.21

Exhibit G

CAPITAL FUND

BALANCE SHEET

May 31, 1964

ASSETS

Furniture and Equipment—at cost.....\$ 9,542.58

SURPLUS

Surplus Not Available—Invested in Fixed Assets

Balance—May 31, 1963.....\$ 8,744.84

ADD: Purchases in 1963-64 by General Fund

Thermofax Office Copier and Stand 48409559B/64-06920F	\$ 176.57	
#1941 4-drawer File.....	74.73	
Letter Tray	5.97	
AA-12 Triner Scale, Postage.....	56.65	
#1921 Gray Letter File, 2-drawer.....	51.71	
Tiffany Typewriter Stand, Model 1177.....	24.67	
Office Wall Clock.....	11.27	
Tiffany Typewriter Stand, Model 1177.....	24.67	
Model 1955 Addressograph.....	1,380.20	
Cabinet for Addressograph.....	41.20	1,847.64
		<u>\$ 10,592.48</u>

LESS: Assets Traded

Thermofax Copier, #409988.....	\$ 333.98	
Conversion Kit for Copier.....	46.38	
Model 904B Addressograph.....	669.54	1,049.90
		<u>\$ 9,542.58</u>

Balance—May 31, 1964.....\$ 9,542.58

Report of the Executive Secretary

ANDREW M. CUNNINGHAM, B.S.
Raleigh

This represents my ninth annual report as your Executive Secretary. As your appointed administrator, I have endeavored to fulfill my responsibilities as outlined in the Bylaws, including: operation of the Central Office, co-ordination of committee activities, preparation of the annual session, assisting in the publication of *THE JOURNAL*, the business management of *THE JOURNAL*, publication of *The Newsletter*, and the conduct of the business affairs of the Society. This report constitutes my final responsibility for the year to the Executive Committee and the House of Delegates.

The Central Office: I am thankful to the Executive Committee for their vision in providing the necessary business machines in the Central Office. With a staff of but one full-time and one part-time secretary, it would be physically impossible to implement the increasing demands for services and programs without this equipment. However, we are fast reaching the point when some serious study will need to be given to an enlarged staff, if the work-load continues to grow in the future and more programs are visualized.

During the calendar year 1963, incoming mail totalled 4,840 pieces, and outgoing correspondence totalled 10,027 pieces. In addition, 5,750 Journals and 7,709 Newsletters were mailed from the Central Office. Increased rates on all classes of mail take a heavier toll on our budget each succeeding year.

Committee Activity: The Bylaws provide for 17 standing committees. In addition, there were 18 special committees which were active this year. The affairs of the Society are carried out by these committees. The co-ordination of this committee structure of 35 committees consumes a good portion of the Executive Secretary's time.

It is inspiring to work with these dedicated men, who give generously of their time and talent, at much personal sacrifice, in behalf of the profession. They are the unsung heroes of the Society. Too often they are unheralded, unappreciated and sometimes maligned. Much of their

work is recorded in the reports which they submit to the House of Delegates. I am grateful for their wonderful co-operation with the Central Office.

Annual Session: Preparation for the annual session is a year-long project. The efforts of the Central Office in this area were mainly concerned with the securing of commercial exhibits, arrangements with the hotel for housing and meeting space, the printing of hand programs, and attending to the myriad details necessary to assure a smoothly running convention. Sale of exhibit space went exceedingly well this year. By early December all 89 booths had been sold. Once again we are all indebted to a host of committee chairmen and members for their interest and labor in perfecting plans for an annual session which is a credit to the profession.

Publications: As Managing Editor of *THE JOURNAL*, I have tried to give all assistance possible to the Editor, to the end that the membership may enjoy and benefit from its pages, and be proud of the publication.

Each of the four issues has been placed in the mail at the proper time. A directory of members was included as a supplement to the January issue. The transactions of the House of Delegates were included in the September issue and the district programs were carried in the August issue, so that the fall meetings would be advertised well in advance. Sale of advertising has been good, and advertising pages have averaged between 35-40 per cent of editorial pages. It has been a pleasure to work closely with the retiring Editor and the new Editor and the Associate Editor.

During 1963, seven issues of *The Newsletter* were published. This means of communication with the membership continues to be a popular and effective medium designed to keep them informed. I am grateful for the many compliments received on this publication.

In addition, the Central Office has edited and published: a new edition of the *Code of Ethics*, including all amendments to date; the *Blue Book* for the House of Delegates; a revised edition of the *Manual for District Officers*; and a *Legislative Manual* for use by the Legislative Committee during the 1963 General Assembly.

Membership Gain: It is noteworthy, I think, to call your attention to a substantial gain in membership over the past 10 years. In 1954 we had 937 members. At the close of 1963 the Society boasted 1,211 members, a gain in a decade of almost 30 per cent. This means that the membership, in co-operation with the Membership Committees on the state and district levels have done a more than creditable job of recruiting.

Dental Student Recruitment: One of the major projects of the Council on Dental Health and Information this past year has been the recruiting of dental students. At the request of the Council, a special exhibit was prepared by the Central Office for use at high school career days throughout the state.

This exhibit was displayed at the first state-wide Health Fair in Duke Indoor Stadium, April 1-4, and Raleigh Career Week April 6-8. It will be shown at the District meetings next Fall and at all six Congress of Health Career meetings during the next year. It will also be available for loan by local societies for display at their local high school career days.

Meetings and Conferences: During the past year I have attended the following meetings and conferences:

- 4 Out-of-state meetings
- 10 Committee meetings
- 17 Conferences with officers and committee chairmen
- 3 Local dental society meetings
- 6 Meetings with other associations and agencies
- 6 Legislative hearings
- 3 District meetings

In addition I have presented lectures at the UNC School of Dentistry and the Industrial Education Center in Durham.

I was also a witness at the two-day hearing of the Hawkins suit against the Society, in the Federal District Court in Charlotte in September.

District Officers' Conference: On December 7-8, 1963 the 11th Annual District Officers' Conference was held in Pinehurst. I worked closely with the officers of the Conference in perfecting plans for this two-day meeting. It was well worth the effort. Attendance was excellent and the district officers appeared to profit from the experience. They were schooled in their duties and responsibilities as district officers.

Appreciation: I would express my sincere appreciation to the officers and Executive Committee members for the confidence and trust they have placed in me during the past year and for making my work in behalf of the Society pleasant and enjoyable, and a challenge rather than a burden.

I am continually indebted to my secretary, Miss Riddle, for her support and capable work. She has been the Central Office Secretary from the time it was opened in 1955 and I deeply appreciate her loyalty and understanding through the years.

And to my wife, Dorothy, who has been assisting in the Central Office on a part-time basis, I owe a debt of gratitude. Too often she finds herself saddled with jobs "no one has the time to do," and I appreciate the cheerfulness and efficiency with which she tackles these jobs.

Action by House of Delegates: Received for information May 12, 1964.

Resolution

The following resolution was presented by Reference Committee C:

Resolved, that the North Carolina Dental Society take cognizance of the integrity, devotion, and dedication of our Executive Secretary and his official family by this expression of appreciation and recognition by the members of the Society.

Action by House of Delegates: Adopted May 12, 1964.

Minutes of Executive Committee

THOMAS G. COLLINS, D.D.S.
Chairman
Raleigh

MAY 8, 1963

JUNE 15, 1963

OCTOBER 6, 1963

JANUARY 11, 1964

JANUARY 12, 1964

MAY 10, 1964

THE CAROLINA, PINEHURST, NORTH CAROLINA May 8, 1963

Call to Order: The Executive Committee convened in the Crystal Room of The Carolina, Pinehurst, North Carolina, Wednesday, May 8, 1963. President S. Byron Towler called the meeting to order at 12:15 p.m. Dr. Darden J. Eure led in prayer.

Roll Call: Drs. S. Byron Towler, T. G. Collins, Darden J. Eure, Barry G. Miller, Dennis S. Cook, Pearce Roberts, Jr., E. D. Baker, and C. W. Poindexter.

Others present were: Dr. C. C. Diercks, Editor-Publisher; Mr. Andrew M. Cunningham, Executive Secretary; and Miss Mira Riddle, Central Office Secretary.

Introduction of New Members: Dr. Towler presented Dr. T. G. Collins, Chairman of the Committee for 1963-64. He welcomed Dr. Barry G. Miller, newly-elected Vice President and Dr. C. W. Poindexter, newly-appointed member of the Executive Committee. He noted that Dr. Darden J. Eure had been elected President-Elect and Dr. Dennis S. Cook had been re-elected Secretary-Treasurer.

Dr. Collins assumed the chair and presided for the remainder of the meeting.

Appointment of Editor-Publisher: Dr. Cook moved that Dr. C. C. Diercks be re-appointed Editor-Publisher for the ensuing year. Dr. Eure seconded the motion and it was carried. Dr. Collins expressed the appreciation of the Executive Committee for Dr. Diercks' excellent work as Editor-Publisher for the past five years and commended him for the high standards maintained by the Journal under his leadership.

Dr. Diercks thanked the Executive Committee for the confidence expressed in him and requested that the Committee continue its search for his successor.

Appointment of Executive Secretary: Dr. Eure moved that Mr. Andrew M. Cunningham be re-appointed Executive Secretary for the year 1963-64. Dr. Roberts seconded the motion and it was carried.

Dr. Collins and Dr. Miller commended Mr. Cunningham for his services during the past eight years and expressed the pleasure of the Executive Committee that he would continue in this post.

Dr. Eure moved that the annual salary of the Executive Secretary be increased by \$400.00 for the fiscal year 1963-64. Dr. Poindexter seconded the motion and it was carried.

Mr. Cunningham accepted the offer of re-appointment with thanks.

Dr. Roberts reported that the Committee appointed last year to study the job structure of the Executive Secretary of the North Carolina Dental Society had sent to each member a survey of their findings regarding salary, fringe benefits, etc., of all Executive Secretaries of all societies in the United States. He also suggested that a new committee for the current year be appointed by the Chairman of the Executive Committee to continue this study, hoping that some of the members would be men that had originally been on the committee that selected the man to be the first Executive Secretary of the Society.

It was also suggested that not only should minimum and maximum salary range be established, along with additional benefits, if desirable, but also a more definite working arrangement with specific duties be made.

Dates for 1965 Annual Session: Dr. Eure noted that the General Session on May 6, voted to hold the 1965 annual session in Pinehurst. Mr. Cunningham read a letter from The Carolina dated April 11, inviting the Society to hold its 109th Annual Session at The Carolina on either of the following dates: May 6-9, 1965 (Thursday through Sunday) or May 16-19, 1965 (Sunday through Wednesday).

Dr. Eure moved that the 109th Annual Session be held at The Carolina in Pinehurst, May 16-19, 1965. Dr. Baker seconded the motion and it was carried.

Out-of-State Travel for Executive Secretary: Dr. Towler moved that the Executive Secretary be authorized to attend the 14th Secretaries' Management Conference in Chicago, June 3-5, 1963 at the expense of the Society. Dr. Cook seconded the motion and it was carried.

Premise and Convention Liability Insurance: Mr. Cunningham advised that the Society did not have a premise liability insurance policy on the Central Office nor did the Society carry any liability insurance on its annual meetings. Dr. Collins appointed the following committee to study the matter and report at the January meeting: Dr. Miller, Chairman and Dr. Poindexter.

Budget Committee: Dr. Collins announced the appointment of a Budget Committee to consist of: Dr. Baker, Chairman; Dr. Cook and Dr. Eure. The committee was requested to submit its report at the next meeting.

Investment of Reserves: Dr. Poindexter noted that all reserve funds were now invested in government bonds, savings accounts and building and loan companies. He suggested the possibility of investing these funds in less conservative investments which would yield greater protection against the loss of purchasing power through inflation. Dr. Towler indicated he would make some recommendations on this matter at the next meeting.

Next Meeting: Dr. Towler invited the Executive Committee to hold its next meeting at his home in Raleigh on June 15, 1963.

Dr. Eure thanked Dr. Towler for his invitation and moved that the next meeting of the Executive Committee be held at Dr. Towler's home in Raleigh on June 15, 1963. Dr. Baker seconded the motion and it was carried.

Adjournment: At 1:25 p.m. Dr. Poindexter moved that the meeting be adjourned. Dr. Cook seconded the motion and it was carried.

DENNIS S. COOK, D.D.S.
Secretary-Treasurer

Read and approved June 15, 1963

RALEIGH, NORTH CAROLINA

June 15, 1963

Call to Order: The Executive Committee convened at the home of President and Mrs. S. Byron Towler, Raleigh, North Carolina, Saturday, June 15, 1963. Dr. Thomas G. Collins, Chairman called the meeting to order at 8:50 p.m. and led in prayer.

Roll Call: Members of the Executive Committee present were: Doctors Thomas G. Collins, Chairman; Darden J. Eure, E. D. Baker, Barry G. Miller, C. W. Poindexter and S. Byron Towler.

Messages were received from Drs. Cook, Roberts and Diercks expressing their regret that due to unforeseen circumstances, they would not be able to attend the meeting.

Others present were: Dr. L. D. Herring, Chairman of the Program Committee; Mr. Andrew M. Cunningham, Executive Secretary; and Miss Mira Riddle, Central Office Secretary.

Approval of Minutes: Dr. Towler moved that the minutes of May 4, 1963, as previously distributed to the committee in mimeographed form, be approved. Dr. Poindexter seconded the motion and it was carried.

Dr. Towler moved that the minutes of May 8, 1963 as previously distributed to the committee in mimeographed form, be approved with corrections. Dr. Poindexter seconded the motion and it was carried.

Secretary-Treasurer's Report: The report of the Secretary-Treasurer dated May 31, 1963 was received for information on motion by Dr. Eure, seconded by Dr. Baker, and duly carried.

Dr. Poindexter moved that the Secretary-Treasurer and the Executive Secretary be authorized to invest surplus cash in all funds in accordance with established policy. Dr. Baker seconded the motion and it was carried.

Appointment of Investment Committee: Dr. Collins appointed the following to an Investment Committee which is to study the whole problem of investment of reserves and submit recommendations to the 1964 House of Delegates: Drs. Poindexter, Chairman; Eure and Towler.

Approval of Budget: Dr. Baker, Chairman of the Budget Committee submitted a proposed budget for 1963-64. A copy is attached. Dr. Poindexter moved that it be approved. Dr. Eure seconded the motion and it was carried.

Expenses of Editor-Publisher: Dr. Eure moved that the Secretary-Treasurer be authorized to reimburse the Editor-Publisher for expenses incurred up to \$150.00 upon presentation of an itemized statement requesting payment.

Report of Program Committee: Dr. L. D. Herring, Chairman of the Program Committee, announced that the following essayists had been secured for the 108th Annual Session: Dr. R. A. McEwen, Atlanta, operative dentistry; Colonel Frank C. Jerbi (DC), Walter Reed Hospital, prosthetics; and Dr. Raymond E. Boudreaux, New Orleans, oral surgery. He estimated that the anticipated expenses for the entire session would be \$7,000.00. The report was received for information.

Report on Legislation: Mr. Cunningham reported for the Chairman of the Legislative Committee on the progress of legislation in the 1963 General Assembly which the Society either sponsored, supported or opposed.

The Committee requested the Chairman to write Dr. H. Royster Chamberlee expressing appreciation for his efforts as Chairman of the Legislative Committee during the 1963 General Assembly. The Committee also requested the Chairman to extend thanks to Dr. G. L. Hooper for his able

assistance in the Society's legislative program during the 1963 General Assembly.

Policy on Memorial Gifts to Dental Foundation: Mr. Cunningham pointed out that it had been the custom for the past several years for the Society to make a memorial gift of \$10.00 to the Dental Foundation of North Carolina, Incorporated when a member died. It was agreed that such a gift in lieu of flowers was appropriate and a proper expression of sympathy.

Dr. Towler moved that the policy of contributing \$10.00 to the Dental Foundation of North Carolina, Incorporated in memory of each deceased member be continued. Dr. Eure seconded the motion and it was carried.

Policy on Committee Reports: Dr. Miller moved that the Executive Secretary be directed to limit his activities and responsibilities in the preparation of committee reports to furnishing information, correcting and editing, and that all committee chairmen be charged with the responsibility of writing and submitting their own reports. Dr. Baker seconded the motion and it was carried.

Policy on Waiver of Dues: It was noted that the state and district dues of Dr. Sandy C. Marks had been waived since he became a Presbyterian dental missionary to the Belgian Congo several years ago. Dr. Eure moved that the 1964 state dues of Dr. Marks be waived, provided he continued to be employed by the Board of World Missions. Dr. Poindexter seconded the motion and it was carried.

Dr. Miller moved that the Chairman of the Executive Committee request the Constitution and Bylaws Committee to study possible amendments providing for remission and/or waiver of dues and submit recommendations on the matter to the House of Delegates. Dr. Eure seconded the motion and it was carried.

Policy on Sale of Commercial Exhibit Space: Dr. W. Penn Marshall, Chairman of Exhibits Committee, recommended that because of limited space available for commercial exhibits at the annual session and the growing demand for booths, that the Exhibits Committee discontinue the policy of making free space available to soft-drink companies.

Dr. Eure moved that the Exhibits Committee be instructed to charge all commercial exhibitors for exhibit space at the Annual Session, including soft-drink companies. Dr. Miller seconded the motion and it was carried.

Policy on Use of Directory: Dr. Baker moved that the policy be continued of prohibiting commercial companies from using a membership directory as a general mailing list. Dr. Towler seconded the motion and it was carried.

Invitation to Exhibit at Health Fair: Mr. Cunningham read a letter from the Durham-Orange County Medical Society announcing plans for a health fair on "Medicine Tomorrow" at the Duke University Indoor Stadium, March 29-April 4, 1964, and inviting the Dental Society to participate as an exhibitor. The invitation was referred to the Council on Dental Health and Information. It was noted that the American Medical Association will exhibit. It was suggested that the Durham-Orange Medical Society be requested to invite the American Dental Association to participate as an exhibitor.

Next Meeting: The Executive Committee agreed that its next meeting would be held Sunday, October 6 at 2:00 p.m. at the Mid-Pines Club in Southern Pines, during the Third District meeting.

Expression of Thanks: Dr. Eure moved that the Executive Committee

express its gratitude and thanks to President and Mrs. Towler for entertaining the Executive Committee so graciously in their home. Dr. Baker seconded the motion and it was carried.

Adjournment: On motion by Dr. Poindexter, seconded by Dr. Baker, and duly carried, the meeting was adjourned at 11:40 p.m.

S. BYRON TOWLER, D.D.S.
President

Read and approved October 6, 1963

BUDGET 1963-1964
Adopted June 15, 1963

ESTIMATED INCOME

Dues	\$37,065.00	
JOURNAL	3,600.00	
Annual Session	7,310.00	
Miscellaneous	200.00	\$48,175.00

BUDGETED EXPENSE

A. Administrative Expense

1. Salaries and S. S. Taxes.....	\$14,825.00	
2. Office Rent	1,500.00	
3. Utilities	500.00	
4. Office Supplies	900.00	
5. Repairs and Maintenance.....	550.00	
6. Telephone	600.00	
7. Postage	750.00	
8. Travel	1,600.00	
9. Insurance	225.00	
0. Miscellaneous	225.00	\$21,675.00

B. Annual Session 7,000.00

C. Publications

1. JOURNAL	\$ 4,500.00	
2. Transactions	1,450.00	
3. Directory	650.00	
4. Newsletter	400.00	7,000.00

D. Committees

1. Children's Dental Health.....	\$ 600.00	
2. Council on Dental Health & Information	200.00	
3. Library & History.....	200.00	
4. Blue Shield-Blue Cross.....	500.00	
5. Dental Service Corp.....	300.00	
0. Other	500.00	2,300.00

E. Furniture and Equipment..... 500.00

F. Legal Counsel 5,000.00

G. Miscellaneous

1. Dental Fdn.	\$ 150.00	
2. Bank & Audit.....	175.00	
3. D.O.C.	150.00	
4. Memberships	50.00	
5. City & County Taxes.....	75.00	
6. Fifth District Caucus.....	260.00	
7. Other	100.00	\$ 960.00

H. Contingency Fund..... 3,740.00

<u>\$48,175.00</u>	<u>\$48,175.00</u>
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SOUTHERN PINES, NORTH CAROLINA

October 6, 1963

Call to Order: The Executive Committee convened at Mid-Pines Club, Southern Pines, North Carolina, Sunday, October 6, 1963. Dr. Thomas G. Collins, Chairman, called the meeting to order at 2:20 p.m. Dr. E. D. Baker led in prayer.

Roll Call: Members of the Executive Committee present were: Doctors Thomas G. Collins, Chairman; S. Byron Towler, Darden J. Eure, Pearce Roberts, Jr., C. W. Poindexter, E. D. Baker, and Barry G. Miller.

Others present were: Mr. Andrew M. Cunningham, Executive Secretary; and Miss Mira Riddle, Central Office Secretary.

Approval of Minutes: Dr. Towler moved that the minutes of June 15, 1963, as previously distributed to the committee in mimeographed form, be approved with corrections. Dr. Eure seconded the motion and it was carried.

Financial Reports: On motion by Dr. Baker, seconded by Dr. Roberts, and duly carried, the Auditor's Report on the accounts of the Secretary-Treasurer for the fiscal year 1962-63 was approved.

The Secretary-Treasurer's report for the period June 1 to September 30, 1963 was received for information, on motion by Dr. Roberts, seconded by Dr. Eure, and duly carried.

Report of Insurance Committee: On motion by Dr. Towler, seconded by Dr. Miller, and duly carried, a report from the Insurance Committee, Dr. John S. Dilday, Chairman, was received for information.

It was noted that the Insurance Committee, after considering the question of a professional liability insurance program for the membership, had decided that it was not feasible or advantageous to establish such a program at this time.

Medical Advisory Council, State Board of Mental Health: It was noted that H. B. 797, ratified by the 1963 General Assembly, created a Medical Advisory Council to the State Board of Mental Health. It was agreed that dentistry should be properly represented on this Council. Dr. Towler proposed the name of Dr. S. H. Steelman of Lincolnton. Dr. Poindexter moved that the President recommend to the Governor that Dr. Steelman be appointed to the Medical Advisory Council to the State Board of Mental Health. Dr. Baker seconded the motion and it was carried.

North Carolina Mental Health Council: It was noted that the 1963 General Assembly amended the General Statutes of North Carolina by eliminating the provision that a representative of the North Carolina Dental Society be a member of the North Carolina Mental Health Council, and providing that a dentist licensed to practice in North Carolina be appointed by the Governor after requesting recommendations from the President of the North Carolina Dental Society.

The Committee was advised by counsel that by this amendment the term of Dr. Cleon W. Sanders, currently a member of the Mental Health Council, was terminated.

It was moved by Dr. Poindexter, seconded by Dr. Roberts, and duly carried, that the President recommend Dr. L. G. Page of Yanceyville to succeed Dr. Sanders as a member of the North Carolina Mental Health Council, should the Governor ask for recommendations.

Commission on Establishment of a Medical Center: Dr. Miller called attention to a resolution passed by the 1963 General Assembly asking the Governor to appoint a Commission to study the feasibility of setting up a medical training center and to report in 1965. Initially, Charlotte was the only city to be considered, but the resolution was amended to include "any other locality in North Carolina."

The Committee agreed that it was important that the dental profession be represented on this Commission.

Dr. Roberts moved that the President, at his discretion, recommend a dentist to the Governor for appointment to the Commission. Dr. Baker seconded the motion and it was carried.

Industrial Commission Fee Schedule: Dr. Towler reported that Mr. J. W. Bean, Chairman, North Carolina Industrial Commission, had notified him that medical, dental, nursing and hospital fee schedules were being revised and if the Society had any changes to recommend in the dental fee schedule which had been in effect since 1958, he would be glad to consider them.

Dr. Towler stated that he appointed Drs. T. G. Collins, S. L. Bobbitt and E. D. Baker to assist him in preparing a suggested revised dental fee schedule for the Commission. Mr. Bean indicated that it would be two weeks before a decision by the Commission on the matter would be released.

Dr. Roberts moved that the Executive Committee extend thanks to Dr. Towler and the Committee for their efforts and cooperation with the Industrial Commission. The motion was seconded by Dr. Eure and was carried.

Dr. Roberts suggested that the President consider the appointment of a special committee to make a comprehensive study of all dental fee schedules of state and federal agencies currently in effect in North Carolina, to include a comparison with those in effect in other states.

Resignation of Editor-Publisher: Dr. Eure presented to the committee the resignation of Dr. C. C. Diercks as Editor-Publisher of the JOURNAL. Dr. Diercks, he said, had served the Society in this capacity since 1959 and that, for personal reasons, he wished to be relieved from this responsibility, effective with the publication of the January 1964 issue.

Dr. Roberts moved that the resignation of Dr. Diercks as Editor-Publisher be accepted with regret, that a letter of appreciation be written to Dr. Diercks for his service to the Society and the excellent standards of journalism maintained during his tenure, and that an appropriate announcement be made in the JOURNAL. Dr. Baker seconded the motion and it was carried.

Dr. Eure moved that Dr. Barry G. Miller be appointed Editor-Publisher to succeed Dr. Diercks. He stipulated that Dr. Miller be extended the appointment and be given a reasonable time in which to make his decision. Dr. Baker seconded the motion and it was carried.

Out-of-State Travel for Executive Secretary: On motion by Dr. Baker, seconded by Dr. Roberts, and duly carried, the Executive Secretary was authorized to attend the 104th Annual Session of the American Dental Association in Atlantic City, October 14-17, 1963 at the Society's expense.

Dr. Towler moved that the Executive Committee authorize Miss Mira Riddle, Central Office Secretary, to attend the ADA meeting in Atlantic City, at Society expense. He pointed out that Miss Riddle had been a very able and competent employee of the Society for over eight years and that this would be her first opportunity to observe first-hand the activities of organized dentistry on a national level. He stated that the experience would be of assistance to her in her work in the Central Office, as well as an expression of appreciation of her faithful service to the Society. The motion was seconded by Dr. Eure and it was carried.

Communications: Mr. Cunningham presented a letter from Southern Bell Telephone and Telegraph Company enclosing a busy study of the telephone service at the Central Office. Dr. Eure moved that it be accepted as information. Dr. Baker seconded the motion and it was carried.

An invitation to Society officers and members to attend the annual meeting of the American and Michigan Association of Professions in Lansing, Michigan, February 7-8, 1964, was received for information on motion by Dr. Baker, seconded by Dr. Miller, and duly carried.

A letter from the American Dental Association to Dr. R. A. Hawkins

of Charlotte was received for information on motion by Dr. Roberts, seconded by Dr. Eure, and duly carried.

An invitation from the American Hospital Association to interested Society officers and members to attend a specialized institute on Hospital Dental Service in Chicago, December 4-6, 1963 was read. Dr. Roberts suggested that the President try to get a representative of the Society to attend.

Nursing Home Advisory Council: Dr. Towler submitted an informal report from Dr. Jere Roe, who has been representing dentistry on the Nursing Home Advisory Council to the State Board of Health.

Dr. Roe advised that after two years of work the Council had proposed rules and regulations governing the licensing of nursing homes by the State Board of Health, which significantly include provisions for dental treatment of patients in these institutions. He stated that approval of these regulations is anticipated momentarily.

Specifically, as far as dentistry is concerned, the rules and regulations provide that: (1) patients will be given a dental examination at least annually; (2) patients will be furnished a toothbrush and encouraged to use it regularly after meals; (3) where needed, patients will be provided with a receptacle for the proper care of dentures and dental appliances; (4) local dentists will be made available for emergency dental treatment of patients.

The committee noted that this was the first time any mention of dental care was included in the rules governing nursing homes.

Dr. Miller moved that the report be received for information with commendation to Dr. Roe for his efforts in behalf of dentistry in this area. Dr. Baker seconded the motion and it was carried. Dr. Miller suggested that the membership be advised of these regulations through the *Newsletter* and *JOURNAL*, as soon as possible after their adoption by the Board of Health.

Study Proposed on Reimbursement: Dr. Roberts suggested that some thought and study should be given to the reimbursement of elected and appointed officers and delegates for certain expenses incurred in the performance of their duties in behalf of the Society. He stated that financial considerations should not properly prohibit any member from accepting these responsibilities.

Dr. Roberts moved that a committee be appointed by the Chairman of the Executive Committee to conduct a study of the feasibility of defraying travel and out-of-pocket expenses of elected and appointed officers, delegates to the ADA, and duly appointed representatives of the Society at conferences. Dr. Eure seconded the motion and it was carried.

It was suggested that, as a part of its study, the committee determine the policies of other state societies in this regard.

Dr. Collins appointed Dr. Roberts as chairman and Drs. Towler and Eure as members of the committee.

Discussion of Litigation: Dr. Roberts mentioned that a decision by the Court on the litigation involving the Society would be forthcoming before the next annual session. He suggested that it might be wise to consider some way of fully re-acquainting the delegates with the basic issues involved.

Mr. Cunningham advised the committee that the program planned for the District Officers' Conference in December would include a discussion of the issues involved in the litigation.

Dr. Roberts further suggested that it was the understanding of a good many members that legal counsel had been retained to defend the Society in the suit and that upon its termination, there would be no further need of retaining counsel. He stressed that this was another area which needed clarification.

Discussion followed on these issues, but no action was taken.

Next Meeting: Mr. Cunningham announced that, subject to confirmation by the committee, he had tentatively arranged with The Carolina for the joint meetings of the Executive and Annual Session Committees to be held there the weekend of January 11-12, 1964.

Dr. Eure moved that the next meeting of the Executive Committee be held Saturday, January 11, 1964 at 8:30 p.m. at The Carolina in Pinehurst, and that the Executive and Annual Session Committees meet jointly on Sunday, January 12, 1964, at 9:30 a.m. at The Carolina. The motion was seconded by Dr. Miller and was carried.

Expression of Thanks: Chairman Collins expressed to the committee members his appreciation and that of President Towler for their efforts in attending the meeting and for their enthusiastic participation in the deliberations.

Adjournment: On motion by Dr. Roberts, seconded by Dr. Baker, and duly carried, the meeting was adjourned at 5:00 p.m.

S. BYRON TOWLER, D.D.S.
President

Read and approved January 11, 1964

THE CAROLINA, PINEHURST, NORTH CAROLINA January 11, 1964

Call to Order: The Executive Committee convened in the Crystal Room of The Carolina, Pinehurst, North Carolina, Saturday, January 11, 1964. Dr. Thomas G. Collins, Chairman, called the meeting to order at 9:15 p.m. Dr. E. D. Baker led in prayer.

Roll Call: Members of the Executive Committee present were: Drs. T. G. Collins, Chairman; S. Byron Towler, Barry G. Miller, Darden J. Eure, Dennis S. Cook, Pearce Roberts, Jr., C. W. Poindexter and E. D. Baker.

Others present were: Dr. M. Lamar Dorton, Dr. C. C. Diercks, Dr. C. H. Teague, Dr. S. H. Isenhower, Dr. W. L. Hand, Jr., Mr. A. M. Cunningham, Executive Secretary; and Miss Mira Riddle, Central Office Secretary.

Approval of Minutes: Dr. Roberts moved that the minutes of October 6, 1963, as previously distributed to the committee in mimeographed form and as amended by him, be approved. Dr. Eure seconded the motion and it was carried.

Financial Reports: The Secretary-Treasurer's report for the period June 1 to December 31, 1963, was received for information, on motion by Dr. Poindexter, seconded by Dr. Baker, and duly carried.

Council on Dental Health and Information: Dr. W. L. Hand, Jr., Chairman, Council on Dental Health and Information, presented a request for an additional \$300 to underwrite a state-wide dental student recruitment program, including distribution of literature and the construction of an exhibit to be used by the Council in the promotion of this project. It was noted that the Council had been allotted \$200 in the 1963-64 budget.

On motion by Dr. Poindexter, seconded by Dr. Eure, the Council on Dental Health and Information was granted \$300 in addition to the \$200 already budgeted for the purpose of promoting a state-wide dental student recruitment program.

Dr. Hand announced that a Career Day would be held at the UNC School of Dentistry in Chapel Hill, April 25, as part of the recruitment program.

Report on Reimbursement Policy: Dr. Roberts submitted a comprehensive report of the policies of 29 constituent societies for the reimbursement of travel and out-of-pocket expenses of elected and appointed officers, delegates to the ADA, and appointed representatives at conferences. It was noted that many states allow their officers a limited expense account, an honorarium, or some other form of partial re-payment for out-of-pocket expenses.

It was moved by Dr. Roberts that the report and all related material compiled be filed in the Central Office as a permanent record; that the report be accepted as information by the Executive Committee; and that it be submitted to the 1964 House of Delegates for consideration and continued study by a specially appointed committee. Dr. Cook seconded the motion and it was carried.

Premise and Convention Liability Insurance: Dr. Miller reported that after thoroughly studying the matter of convention liability insurance, including consultations with insurance representatives, his committee concluded that such insurance was not needed by the Society.

He recommended, however, that the Society should maintain premise liability insurance on the Central Office.

Dr. Miller moved that the Society should not consider the purchase of convention liability insurance. Dr. Poindexter seconded the motion and it was carried.

Dr. Miller moved that the Society purchase premise liability insurance on the Central Office. The motion was seconded by Dr. Baker and it was carried.

Membership Committee: Dr. Eure reported that the Membership Committee was extending every effort to reinstate members who had been dropped from the roll and to contact prospective new members.

Dr. Eure moved that it be made a matter of record that the following dentists had not paid their 1963 dues by December 31, 1963, and according to Article VI, Section 6, of the Bylaws, have been dropped from the roll:

Frist District: W. McD. Johnson, Banner Elk
Second District: B. C. Schamp, Orlando, Florida
J. H. Stancil, Kannapolis
Third District: John N. Hester, Reidsville
Ruta B. Paulson, Raleigh
F. H. Underwood, Carthage
Fourth District: Herbert Smith, Raleigh

Dr. Baker seconded the motion and it was carried.

Editor-Publisher: Dr. Collins announced that Dr. Barry G. Miller had formally accepted appointment as Editor-Publisher to succeed Dr. C. C. Diercks, effective after the publication of the January 1964 issue. Dr. Collins expressed the appreciation of the Executive Committee and the Society to Dr. Miller for his willingness to serve in this capacity.

Dr. Eure moved that the acceptance of the appointment as Editor-Publisher by Dr. Barry G. Miller be made a matter of record. Dr. Baker seconded the motion and it was carried.

Assistant Editor-Publisher: It was made a matter of record by Dr. Collins that the mail ballot of November 8, 1963 recommending the appointment of Dr. M. L. Dorton as Assistant Editor-Publisher had resulted in nearly equal concurring votes and that Dr. Dorton had been officially appointed to this office.

Printing of Code of Ethics: Mr. Cunningham reported that the supply of printed copies of the Society's Code of Ethics was exhausted. He stated that 2,000 could be printed for approximately \$135.00.

Dr. Poindexter moved that 2,000 copies of the Society's Code of Ethics be printed, to include all amendments to date. Dr. Towler seconded the motion and it was carried.

Capital Expenditure: Mr. Cunningham explained that bulk mailing of the several publications from the Central Office involved a considerable amount of man hours during the year, which could more profitably be spent on more creative duties. To eliminate this waste of man hours, he said, would require addressograph equipment of a different type from the one now in use. The cost of such equipment new would be in the neighborhood of \$3,600, he estimated.

He stated that a company in Raleigh was offering for \$1,995 an addressograph machine which would fill this need. The machine had been purchased brand-new three years ago, but had never been used. He estimated that the present machine in the Central Office could be sold for approximately \$175.

Dr. Cook moved that the Executive Secretary be directed to negotiate for the purchase of the machine and that an amount not to exceed \$2,000 be authorized for this purpose. Dr. Miller seconded the motion and it was carried.

Request from UNC: Mr. Cunningham read a letter from Dr. John C. Brauer, Dean, UNC School of Dentistry, requesting that all dental school students at UNC be furnished copies of THE JOURNAL OF THE NORTH CAROLINA DENTAL SOCIETY free of charge.

Mr. Cunningham estimated that this would cost the Society approximately \$200 annually.

Dr. Miller commented that besides the cost involved, he questioned the advisability of giving the JOURNAL gratis to the students. He suggested that a nominal charge for the service might cause the students to better appreciate the JOURNAL.

Dr. Miller moved that students in the UNC School of Dentistry and students from North Carolina currently enrolled in any of the accredited dental schools in the country be offered a student subscription rate to the JOURNAL at \$1.00 annually. Dr. Cook seconded the motion and it was carried.

4-H Club Health Pageant: Mr. Cunningham announced that he had been advised that the theme of the annual 4-H Club pageant to be staged in Raleigh in the summer of 1964 was to be "Dental Health." Chatham County will sponsor the pageant this year and Dr. Noah R. Wilson, Jr. of Pittsboro had been influential in having "Dental Health" approved by the State 4-H organization as the theme. Mr. Cunningham said that Dr. Wilson had requested help from the Society in gathering material and information for the production of the pageant.

The Executive Committee agreed that the Society should make the most of this opportunity to highlight the need for good dental care through this means and that Dr. Wilson and the Chatham County 4-H Club should receive the wholehearted cooperation of the Society in this project.

The report on the project was received for information.

I.R.S. Inspection: Mr. Cunningham reported that on Wednesday, January 8, 1964, Mr. John Moser of the Internal Revenue Service, had examined the records of the North Carolina Dental Society for the fiscal year 1962-63 for the purpose of determining the Society's not-for-profit status and an exemption from payment of income tax on its receipts. Upon completion of the examination Mr. Moser complimented the Society on the manner in which the records were kept, indicated that no exception would be noted in his report to the reviewing board, and that the Society's status as a not-for-profit association, exempt from income tax, would be continued.

Presentation at Annual Session: President Towler proposed that a special presentation be made at the Annual Session honoring a prominent member of the Society and recognizing his contribution to dentistry. (Note: Dr. Towler named the man to be honored, and requested that it not be revealed prior to the presentation.)

Dr. Towler moved that an appropriation of \$100 be made for this purpose. Dr. Roberts seconded the motion and it was carried.

Fifth District Trustee Organization: A copy of the Fifth District Organization, Manual of Procedure, was submitted to the Executive Committee for approval. Dr. R. D. Coffey advised the Committee that the Delegates of the Fifth District in caucus in Atlantic City last October had adopted the Manual as a means of making the Fifth District a more efficient and effective political instrument in the ADA House of Delegates. It was noted that the Manual provides for an annual assessment of each constituent of \$20.00 per delegate.

Dr. Roberts moved that the Executive Committee endorse and approve the Manual of Procedure as adopted by the Fifth ADA District delegates in caucus in Atlantic City, October, 1963, including the assessment of \$20.00 per delegate for each participating constituent as provided for in Section 9 of the Manual. Dr. Eure seconded the motion and it was carried.

Insurance Proposal: Dr. Cook submitted a proposal for Group Dental Insurance Plans for Employer-Employee Groups from the Provident Mutual Life Insurance Company of Philadelphia. By common consent, the Executive Secretary was instructed to acknowledge receipt of the proposal and refer it to the Insurance Committee.

Status of Litigation: Mr. Cunningham read a letter from Colonel W. T. Joyner, legal counsel, outlining the status of the complaint of Dr. Hawkins against the Society. Colonel Joyner stated that the matter was heard on its merits by Judge Warlick in the United States District Court, Western District, September 9-10, 1963. At the conclusion of the evidence Judge Warlick indicated that he would render his decision after the record had been transcribed by the court reporter, and because of a backlog of work, he did not expect to receive the transcript before sometime in January 1964.

Copies of the transcript will be forwarded to attorneys for each side and within 30 days they will be expected to file requests for findings of fact and conclusions of law.

Colonel Joyner said that to date he had not received the transcript and that a decision could not be expected before the Spring of 1964.

The letter was received for information.

Workmen's Compensation Fee Schedule: Dr. Towler announced that a revised fee schedule for medical, dental, nursing, and hospital fees under the Workmen's Compensation Act would shortly be available and plans for distributing them to dentists were being perfected.

Dr. Towler stated that he and the Industrial Commission Committee would contact Mr. J. W. Bean, Chairman of the Industrial Commission, to request that a special form be prepared for use by dentists in applying for payment for dental services rendered. He explained that currently the dentists are using the medical blank and this is not satisfactory.

Dr. Collins thanked Dr. Towler and the committee for their efforts in the interest of dentistry in securing a more acceptable fee schedule with the North Carolina Industrial Commission.

Institute of Hospital Dental Service: Mr. Cunningham informed the committee that an invitation had been extended by the Charlotte Chamber of Commerce and the Mayor of Charlotte to the Council on Hospital Dental Service of the ADA to hold the 1964 Institute on Hospital Dental Service in Charlotte.

The matter was received as information.

Post-Convention Cruise: Mr. Cunningham submitted a proposal from the Caribbean Cruise Lines suggesting that the Society sponsor a post-convention cruise to Bermuda following the annual session next May.

Dr. Cook moved that the Executive Secretary inform Caribbean Cruise Lines that the Society could not consider its proposal for a post-convention cruise at this time. Dr. Baker seconded the motion and it was carried.

15th National Dental Health Conference: Mr. Cunningham read a letter from the ADA Council on Dental Health inviting the Society to send a representative to the 15th National Dental Health Conference, April 27-29, in Chicago.

By common consent, Dr. W. L. Hand, Jr., will be asked to represent the Society at this Conference.

Committee on Hygienist Program Appointed: President Towler announced that he had appointed a special committee to study the educational program for dental hygienists with a view toward making more dental hygienists available. The committee is composed of: Drs. George S. Alexander, Chairman; Barry G. Miller, C. W. Poindexter, Freeman C. Slaughter, and G. Curtis Wilson.

The committee is expected to submit a report to the House of Delegates next May.

May Meeting: Mr. Cunningham pointed out that it was customary for the Executive Committee to hold its final meeting in Pinehurst on the Saturday night preceding the Annual Session. However, due to a large convention preceding ours which will not check-out until Sunday morning, the facilities of The Carolina may not be available for an Executive Committee meeting Saturday night.

Dr. Baker moved that the final meeting of the Executive Committee be held in Pinehurst, Saturday, May 9, 1964. In the event the facilities of The Carolina are not available, it was suggested that alternative arrangements for the meeting at a hotel or motel in the vicinity of Pinehurst be made. Dr. Miller seconded the motion and it was carried.

Employment Policy: Mr. Cunningham and Miss Riddle were excused from the meeting and a discussion of the job structure, salary and possible retirement benefits for the Executive Secretary followed. No action was taken.

Adjournment: The meeting was adjourned at 1:15 a.m. on motion by Dr. Miller, and seconded by Dr. Towler. The motion was carried.

DENNIS S. COOK, D.D.S.
Secretary-Treasurer

Read and approved May 13, 1964

THE CAROLINA, PINEHURST, NORTH CAROLINA **Joint Session**

Executive Committee and Annual Session Committee **January 12, 1964**

Call to Order: The Executive Committee convened at The Carolina, Pinehurst, North Carolina, January 12, 1964. The meeting was called to order by President Towler at 9:55 a.m. Dr. T. G. Collins led in prayer.

Roll Call: Members of the Executive Committee present were: Drs. T. G. Collins, Chairman; S. Byron Towler, Barry G. Miller, Darden J. Eure, Dennis S. Cook, Pearce Roberts, Jr., E. D. Baker and C. W. Poindexter.

Members of the Annual Session Committee present were: Drs. L. D. Herring, General Chairman (Annual Session and Program); D. W. Seifert, Jr. (Arrangements); James A. Harrell (Clinics); Baxter B. Sapp, Jr. (Entertainment); Gerald M. Cathey (Scientific Exhibits); Richard F. Hunt, Jr. (Hospitality); Worth M. Byrd (Monitor); Robert A. George (Necrology); R. Bruce Warlick (Sports); and John T. Hughes (Visual Education).

Others present were: Dr. M. L. Dorton, Assistant Editor; Dr. F. G.

Harris (Monitor); Dr. C. P. Osborne, Jr. and Dr. C. Z. Candler, Jr., (Prosthetic Dental Service); Dr. Paul Fitzgerald, Jr. (Advisor to N. C. Dental Assistants Association); Dr. Freeman C. Slaughter and Dr. Charles H. Teague (Program); Dr. W. L. Hand, Jr., Dr. Glenn Bitler, Dr. George S. Alexander, Dr. L. C. Holshouser, Dr. C. C. Diercks, Mr. A. M. Cunningham, Executive Secretary; and Miss Mira Riddle, Central Office Secretary.

Reports of Annual Session Committee: Reports were received from all members of the Annual Session Committee, except the Chairman of Projected Clinics. Reports and requests were also received from the Dental Auxiliary and the N. C. Dental Hygienists Association.

Dr. Towler thanked the chairmen and members of the Annual Session Committee for the fine work reflected in their reports and for their efforts in attending the meeting.

Recess: The meeting recessed at 11:00 a.m.

Executive Session: Dr. Collins reconvened the Executive Committee in executive session at 11:15 a.m.

Approval of Reports: The reports from members of the Annual Session Committee were approved with the following exceptions:

Dr. Miller moved that the Arrangements Committee make the Pine Room available to the hygienists on Monday and Tuesday mornings as has been customary in the past. The motion was seconded by Dr. Cook and it was carried. It was suggested that the hygienists be informed of the space problems in The Carolina and be advised that in the future it may not be possible to continue this arrangement.

Dr. Poindexter moved that laboratory technicians be encouraged to attend the scientific sessions according to space available and by invitation only and that it be announced in the *Newsletter* that dentists-members who wish invitations extended to individual laboratory technicians must submit their names to the Central Office. Dr. Baker seconded the motion and it was carried.

Approval of Annual Session Budget: Dr. Miller moved that the following appropriations for the Annual Session Committee be approved:

Arrangements	\$2,475.00*
Clinics	35.00
Entertainment	875.00
Exhibits—Commercial	1,775.00
Exhibits—Scientific	40.00
Hospitality	225.00
House of Delegates.....	175.00
Monitor	—0—
Necrology	75.00
Program	1,375.00
Projected Clinics	—0—
Publicity	250.00
Sports	150.00
Visual Education	15.00
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	\$7,465.00
Contingency	100.00
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Total Budget	\$7,565.00

* Includes \$100.00 appropriated by the Executive Committee at the request of Dr. Towler for a special presentation.

The motion was seconded by Dr. Roberts and it was carried.

House of Delegates: Dr. R. D. Coffey, Speaker of the House, sub-

mitted the following schedule for meetings of the House of Delegates:

Sunday	—	2:00 p.m.
Tuesday	—	9:00 a.m.
Wednesday	—	10:00 a.m.

If necessary the Tuesday meeting can be extended into the afternoon.

Reference Committee hearings will be scheduled all day Monday.

It was noted that the Monitor Committee should be notified of this change in schedule.

Observations by Hotel Convention Manager: Mr. Clifford Smith, Convention Manager, The Carolina, explained that because of the late check out hours of the Bankers' Convention, which immediately precedes ours in 1964, rooms will not be available for the dentists until noon on Sunday. He said a notice to this effect will be included with confirmation notices.

Also, he said that facilities for the Executive Committee would not be available in the hotel for Saturday night. However, he offered the Casa Blanca Cottage as a possible alternative.

He expressed regret that this situation had arisen this year but that it would not occur for another four years.

He suggested that if the Society in the future would consider holding its meeting the latter half of the week, rather than the first half this would enable the hotel to schedule the dental meeting early in May and early check-ins would be no problem.

Employment of a Stenotypist: Dr. Eure moved that a stenotypist be employed to record all general sessions, all meetings of the House of Delegates and the banquet at the option of the President. Dr. Baker seconded the motion and it was carried.

Next Meeting: Dr. Baker moved that the Executive Secretary be instructed to make the best arrangements possible under the circumstances for the Executive Committee to meet Saturday, May 9, 1964 in or about Pinehurst. Dr. Towler seconded the motion and it was carried.

Adjournment: On motion by Dr. Eure, seconded by Dr. Baker and duly carried, the meeting was adjourned at 12:40 p.m.

DENNIS S. COOK, D.D.S.
Secretary-Treasurer

Read and approved May 13, 1964

THE CAROLINA, PINEHURST, NORTH CAROLINA May 10, 1964

Call to Order: The Executive Committee convened in the Bridge Room of The Carolina, Pinehurst, North Carolina, Sunday, May 10, 1964. Dr. Thomas G. Collins, Chairman, called the meeting to order at 1:50 p.m. Dr. Collins led in prayer.

Roll Call: Members of the Executive Committee present were: Drs. S. B. Towler, Barry G. Miller, Dennis S. Cook, Pearce Roberts, Jr., C. W. Poindexter, T. G. Collins and E. D. Baker.

Others present were: Dr. M. Lamar Dorton, Associate Editor-Publisher; Dr. W. L. Hand, Jr., Executive Committee member designate; Mr. R. C. Howison, Jr., Legal Counsel; Mr. Andrew M. Cunningham, Executive Secretary; and Miss Mira Riddle, Central Office Secretary.

Dr. Towler stated that Dr. Eure was unable to be present because of a speaking engagement at the Annual Meeting of the North Carolina Dental Assistants Association.

Announcements: Mr. Cunningham instructed the officers on their duties

and responsibilities at the General Sessions during the 108th Annual Session.

Investment Committee: Dr. Poindexter stated that the Investment Committee had not completed its study of investment of reserves, but would report at a later date. He indicated that the House of Delegates might be a better forum for consideration of the problem.

Commendations: Dr. Collins noted that Drs. Baker, Roberts, and Miller were completing their terms as members of the Committee this year and thanked them for their devoted years of service to the Society in this capacity.

Dr. Collins introduced Dr. W. L. Hand, Jr. who will succeed Dr. Roberts as a member of the Committee.

Dr. Towler thanked the members of the Committee for their staunch support during his administration.

Adjournment: There being no further business, the meeting was adjourned at 2:00 p.m. on motion by Dr. Baker, seconded by Dr. Roberts and duly carried.

DENNIS S. COOK, D.D.S.
Secretary-Treasurer

Read and approved June 20, 1964

Note: The minutes of all meetings during the past administration with the exception of May 10, 1964, were submitted to the House of Delegates and were received for information May 13, 1964.

Obituaries

EVERETT NEWTON BIGGERSTAFF, D.D.S.
PAISLEY FIELDS, D.D.S.
WILLIAM FREDERICK JONES, D.D.S.
CHARLES SOMERS MCCALL, D.D.S.
ARTHUR HARRIS JOHNSON, D.D.S.
GRAHAM MCLEAN, D.D.S.
WALTER LEON MCRAE, D.D.S.
WALTER ERNEST NEAL, D.D.S.
LEE ROY ZIMMERMAN, D.D.S.

EVERETT NEWTON BIGGERSTAFF, D.D.S.

1897-1963

Dr. Everett Newton Biggerstaff died suddenly at his home in Spindale on Monday, December 23, 1963.

Dr. Biggerstaff was born in Cleveland County, March 6, 1897. He was graduated from Piedmont Academy and attended Wake Forest College. He was graduated from Atlanta Dental College in 1923. While in dental school he was a member of Psi Omega Fraternity. He served in the U. S. Army during World War I. He began practice in Lenoir and moved to Spindale in 1924.

Dr. Biggerstaff was a member of the Rutherford County Board of Health, the Second District Dental Society, the North Carolina Dental Society, the American Dental Association, and the Southern Academy of Periodontology. He was a member of the Spindale First Baptist Church, where he was a deacon and served on the building committee of the newly completed parsonage. He was a 32nd degree Mason and a Shriner, having served as past master of the Spindale Masonic Lodge. He was a charter member of the Spindale Rotary Club.

WILLIAM T. PENNELL, D.D.S.

PAISLEY FIELDS, D.D.S.

1889-1964

Dr. Paisley Fields, retired Fairmont dentist, died unexpectedly on April 23, 1964, while having dinner at the Fairmont Hotel where he lived.

Dr. Fields was born in Columbus County near Boardman, North Carolina on December 15, 1889. He was the son of W. K. (Billy) and Docia Fields and attended public schools in Columbus County. He was a graduate of Baltimore College of Dental Surgery, University of Maryland, in Baltimore, Maryland in 1914.

Dr. Fields began the practice of dentistry in Roanoke Rapids and remained there until he entered the Army in World War I. After serving as a dental officer in the Army Dental Corps, he practiced dentistry in Havana, Cuba, and Weldon, North Carolina before moving to Fairmont in 1929. He practiced there until his retirement several years ago.

He was a life member of the Fourth District Dental Society, the North Carolina Dental Society and the American Dental Association.

On the day he died he had been making plans to go to Halifax, North Carolina the following night to be honored by Royal White Hart Masonic Lodge No. 2 on the observance of his 50th year as a Mason.

He had been a member of the Halifax Lodge while he lived in Weldon and had maintained his membership there.

He had been an active member of Sudan Shrine Temple for 45 years and was an honorary life member of Omar Shrine Temple and an active 32nd degree member of Charlotte Consistory for 45 years.

Dr. Fields had no living immediate relatives. Funeral services were held on April 24, 1964, at Evergreen Baptist Church where he was a member, with the Rev. A. P. Stephens and the Rev. Edwin Bullock in charge. Burial was in the Fields Family Cemetery near Evergreen, N. C.

Paisley Fields loved life. He loved people and his many hobbies kept his life full of enthusiasm and interest. His friends will always remember him for his keen sense of humor, a pleasant personality and his benevolent attitude and love for the unfortunate people of this world. His entire estate was left to religious foundations and other benevolent hospitals and societies.

P. C. PURVIS, D.D.S.

ARTHUR HARRIS JOHNSON, D.D.S.

1882-1964

Dr. Arthur Harris Johnson was born at Rock Creek, North Carolina in Alamance County, September 30, 1882, the son of Allison and Emeline Johnson, and died January 7, 1964 at Wesley Long Hospital after suffering a heart attack at his home a few hours earlier.

Dr. Johnson received his early education at Rock Creek Academy and Guilford College. He entered the Medical College of Virginia in 1905 and finished with the degree of Doctor of Dental Surgery in 1908. Dr. Johnson opened his office for the practice of his profession in Greensboro, after passing the Board of Dental Examiners in the summer of 1908, and practiced here for 51 years until he retired in 1959.

He was a life member of the Third District Dental Society, the North Carolina Dental Society and the American Dental Association. He was active in the affairs of his church, the Grace Methodist Church and the Stout Bible class.

Dr. Johnson was married in 1909 to America Seay, and to this union there was born two sons and a daughter.

Dr. Johnson served his patients well in his 51 years of practice. He was a humble man, a gentleman of the highest caliber, faithful to his family, his church and his God.

Dr. Johnson loved the great outdoors under God's heaven. His hobbies were hunting, fishing and gardening.

Life is like a road we travel. On this road he had no desire for personal triumph nor did he wish ill of any man. The life he lived was an asset to his profession and community. He put his trust in the Lord "until the shadows lengthen and the even'n comes and the busy world is hushed, and the fever of life is over and his work is done." God has promised us a safe lodging and a holy rest and peace at the end of the road.

J. T. LASLEY, D.D.S.

WILLIAM FREDERICK JONES, D.D.S.

1887-1963

Dr. William Frederick Jones was born June 15, 1887 to John Wesley and Laura Brown Jones of Clifton, Ashe County, North Carolina

He received his early education in Ashe County Public Schools and Appalachian State Teachers College in Boone. Later he attended the University of Tennessee and received his D.D.S. degree from Vanderbilt Dental School in 1913. He was a member of the Delta Sigma Delta fraternity. After his graduation from dental school he practiced for a period in Cove Creek, Tennessee.

On May 26, 1914 he was married to Miss Ruby Yates of Boomer, Wilkes County, North Carolina.

Dr. Jones began practice in North Wilkesboro in 1916. He was a member of the First Methodist Church of North Wilkesboro where he served many years on the Board of Stewards and in other leadership capacities. He was a member of the North Wilkesboro Masonic Lodge, where he was a Master Mason. He was also a member of the Royal Arch Chapter, Commandery and Shrine in Masonary. During World War I he was a member of the local medical advisory board. He was a charter member of the North Wilkesboro Kiwanis Club.

Dr. Jones was respected by all who knew him. Health forced his retirement in 1956, at which time dentistry lost a sincere practitioner who took every opportunity to advance the local image of his chosen profession.

He had forty years of successful practice in North Wilkesboro. He died at his home on June 14, 1963 after an extended illness. He leaves his wife, two sons, three daughters, one brother and three sisters.

HARRY N. BALDWIN, D.D.S.

CHARLES SOMERS McCALL, D.D.S.
1888-1963

Dr. Charles Somers McCall died June 23, 1963 in Rutherford Hospital after a serious illness of several weeks. He had been in semi-retirement for nine months.

Dr. McCall was born in Burke County January 10, 1888. He was graduated from Berea College and was principal of a high school in Newbern, Tennessee for two years before entering Atlanta Southern Dental College. He began practice in Cliffside and moved to Forest City in 1921.

He was a life member of the Second District Dental Society, the North Carolina Dental Society, and the American Dental Association. He was a member of the First Methodist Church of Forest City, a member of the official board of that church, a church school teacher and for many years superintendent of the church school.

Dr. McCall's four sons are dentists and his daughter is a registered nurse. He had received many honors from members of his chosen profession.

WILLIAM T. PENNELL, D.D.S.

GRAHAM McLEAN, D.D.S.
1893-1964

Dr. Graham McLean was born May 29, 1893 in Alford of Robeson County, and died February 29, 1964. He was educated in McDonald School, Whitsett Institute, Whitsett, North Carolina, and was graduated from Atlanta Dental College in 1917. He practiced general dentistry in Fairmont, Whiteville, Cary and Lumberton until illness forced his retirement in 1956. A good technician and a capable dentist he enjoyed patient respect even after the time of his retirement.

He is survived by his wife, the former Ann Wilkinson of Cary, North Carolina; a son, Graham Wilkinson McLean, a student at University of North Carolina; two daughters, Mrs. Betty McLean Nye of Lumberton and Miss Jean McLean of Wilmington and Washington, D. C.

He was a member of the American Dental Association, the North Carolina Dental Society and the Fourth District Dental Society until his retirement from the active practice of dentistry. He was a charter member of the Southeastern Dental Society. A pioneer during his time, he shall be an inspiration for others to perfect their office procedure and technic.

COLIN P. OSBORNE, JR., D.D.S.

WALTER LEON McRAE, D.D.S.
1892-1963

Dr. Walter Leon McRae, a native of Robeson County, was born on October 7, 1892 and died on November 11, 1963. He was the son of the late John R. and Sarah B. McRae.

After graduation from Atlanta Southern Dental College in 1916, Dr. McRae established his office in Red Springs, North Carolina, where he continued to practice his profession for over forty-seven years.

Dr. McRae was a life member of the American Dental Association, the North Carolina Dental Society, the Fourth District Dental Society, and a member of the Southeastern Dental Society. He was a charter member and past president of the Red Springs Rotary Club, past master of the Red Springs Masonic Lodge, served many years on Robeson County's Welfare Board, and at the time of his death, was a member of the Robeson County Board of Health. He served 21 years as Mayor of Red Springs.

Dr. McRae was an active layman in the Methodist Church, where he served as a delegate to the Annual Conference for over 25 years.

Dr. McRae was a competent dentist, a successful farmer, an ardent sportsman, and a valued friend who contributed freely to his community. He was once publicly described as "six feet four of gentleman and Scotch modesty."

His only survivors are three nieces.

GEORGE W. STEPHENSON, D.D.S.

WALTER ERNEST NEAL, D.D.S.
1915-1964

Dr. Walter Ernest Neal was born in Stuart, Virginia July 20, 1914. He practiced dentistry in Liberty, North Carolina for 24 years. He was a graduate of Wake Forest College and the School of Dentistry of the Medical College of Virginia at Richmond. He was a member of the American Dental Association, the North Carolina Dental Society and the Third District Dental Society. He died April 16, 1964.

Active in community life, Dr. Neal was past president of the Liberty Rotary Club and Chairman of the Official Board of the First Methodist Church of Liberty.

He was named Liberty's "Man of the Year" by the Rotary Club in 1957.

He served on the local school Committee of Liberty for 5 years as chairman. He was a member of the original board of directors of the Liberty Savings and Loan Association, having helped found the organization, and was a member of the Randolph County Board of Health and the Asheboro Elks Lodge.

Dr. Neal was also active in Boy Scouting and was an enthusiastic athletic booster for the Liberty High School.

Survivors include his wife, Mrs. Vira Raynor Neal, two sons and two daughters.

J. ERNEST ROBERTS, D.M.D.

LEE ROY ZIMMERMAN, D.D.S.
1905-1964

Lee Roy Zimmerman was born in Davidson County, December, 1905, the son of Mr. and Mrs. H. S. Zimmerman, and died January 29, 1964.

Dr. Zimmerman's death was caused by an accidental fall into the basement of a newly constructed building. He was taken to the Baptist Hospital at 3:40 p.m. and died at 8:45 p.m. as a result of a fractured skull. Interment was at Floral Garden Park Cemetery.

Dr. Zimmerman's early life was spent in the Enterprise community of Davidson County. He received his early education at Midway Elementary School and Reed's High School.

Dr. Zimmerman entered Atlanta Southern Dental College in the fall of 1923 and was graduated in the class of 1927 with the degree of Doctor of Dental Surgery. After successfully passing the North Carolina State Board of Dental Examination in the summer of 1927, he opened his office to practice his profession with his two brothers, J. R. and L. H. Zimmerman in High Point and continued his practice there until his untimely death.

Lee Roy was affectionately called "Shorty" by his many friends in the profession. All of his colleagues will remember him by the friendly smile that he would greet you with. Dr. Zimmerman liked people and was happiest when he was with friends and doing good for people. He was very active in all phases of church work and was a member of Emmanuel Lutheran Church where he served as president of the Lutheran church men, and a member of the church council. For many years, he served on the Board of Trustees of Lutheridge, Lutheran Assembly grounds at Arden, North Carolina.

Dr. Zimmerman was married to Miss Rachel Sink, August 10, 1927, and to this union there was born a daughter and son. There were five grand-daughters. Dr. Zimmerman was a devoted husband and father and he lived a life that set a good example to follow.

Dr. Zimmerman was a member of Guilford County Dental Society, the Third District Dental Society, the North Carolina Dental Society and the American Dental Association.

Dr. Zimmerman's hobbies were gardening and fishing, but his main hobby was people. He had a host of friends and was happiest when he was doing things with and for others.

J. T. LASLEY, D.D.S.

Committee Reports

STANDING AND SPECIAL
(In alphabetical order with action
by House of Delegates)

ANNUAL SESSION COMMITTEE

L. D. HERRING, *Chairman*

ARRANGEMENTS

D. W. SEIFERT, JR.

CLINICS

JAMES A. HARRELL

ENTERTAINMENT

B. B. SAPP, JR.

EXHIBITS:

Commercial

W. PENN MARSHALL

Scientific

GERALD A. CATHEY

HOSPITALITY

R. F. HUNT, JR.

MONITOR

WORTH M. BYRD

NECROLOGY

ROBERT A. GEORGE

PROJECTED CLINICS

F. N. OGDEN, II

PUBLICITY

T. E. SIKES, JR.

SPORTS

R. BRUCE WARLICK

VISUAL EDUCATION

JOHN T. HUGHES

Combined Report: The reports of all convention committees are included in this one report in an effort to economize on space and to eliminate duplication of effort.

Meetings: The Annual Session Committee met January 11, 1964, and in joint session with the Executive Committee January 12, 1964. Both meetings were held in Pinehurst.

Arrangements: The duties of this committee are manifold. They include housing, assignment of meeting spaces, arrangements and instructions to the hotel, signs, sound systems, registration area, printing of hand programs and the employment of a projectionist and a stenotypist.

With the approval of the Executive Committee the following policies have been followed:

1. The stenotypist will transcribe the transactions of the General Sessions, the House of Delegates, and, at the option of the president, the Annual Banquet.

2. Accommodations at The Carolina will be limited to members, central office staff, and those assisting in the operation of the convention. However, after 5 p.m. on Sunday, The Carolina will be permitted to accept guests at its discretion, if rooms are still available.

3. Application forms for hotel reservations were mailed to the membership from Raleigh Saturday, February 8, 1964. Program highlights were included in a *Newsletter* mailed January 27, 1964. Reservations for all visiting clinicians and speakers were made by this committee.

4. Assignment of meeting rooms in the headquarters hotel for the various organizations has been made on a first come, first served basis and according to the following priority: (1) N.C.D.S. meetings; (2) Auxiliary; (3) Other organizations.

The requirements of clinicians for projectors, screens, microphones, and other equipment have been received from the Program Committee and the equipment will be provided. Arrangements for adequate amplifying equipment for all meetings have been made.

Pocket sized hand programs of the "flip-flop" variety will be printed in adequate quantity for the meeting.

Pre-registration of all members, clinicians and special guests will be accomplished by the Central Office. There will be no waiting line at the registration desk, and a packet of all material, including badges, ribbons and programs will be ready for each member.

An appropriation of \$2,475 has been approved.

Clinics: Twenty-six well-diversified table clinics have been scheduled for Wednesday morning, including 3 by the School of Dentistry, 1 by the North Carolina Dental Hygienists' Association and 22 by members of the Society.

Projected Clinics: Five projected clinics have been secured from the following study clubs: Southeastern Periodontic Study Club, Loblolly Study Club, Coastal Study Club, Demeritt Pedodontic Study Club, and Western North Carolina Study Club. They will be presented on Sunday at 3 p.m.

No appropriation was requested for this activity.

Entertainment: This committee is responsible for the Annual Banquet, special entertainment, and the dance. The Annual Banquet is scheduled at 7 p.m. in the Dining Room on Tuesday. No speaker will be used at the banquet this year. Dr. R. Bruce Warlick has agreed to serve as toastmaster and Dr. H. Royster Chamblee will present the emblem to President Towler. Organ music will precede the banquet. Head table arrangements will be made in accordance with the desires of the President.

Shearen Elebash, a one-man variety show, will appear in the Ballroom immediately following the banquet at 8:30 p.m.

At 10 p.m. Dr. Clyde Young and His Music Makers will furnish the music for a dance in the Ballroom.

An appropriation of \$875 has been approved.

Commercial Exhibits: Because of a growing demand for booths and the limited space available, no free commercial space was offered this year to soft drink companies. This policy was approved by the Executive Committee.

This policy made two more spaces available for rent, and an adjustment in the floor plan permitted two additional spaces, for a total of 89 booths available for sale, four more than in the preceding year.

All 89 booths were sold by early December 1963 at \$85 per booth. This will produce a gross revenue of \$7,565.

As has been the custom in past years, the Exhibit Committee will entertain the exhibitors at a social hour on Monday at 5 p.m.

Door prizes will be furnished by the Exhibit Committee and names of winners will be drawn immediately following the adjournment of the final general session on Wednesday morning.

Shepard Decorating Company of Atlanta will set up and decorate the commercial booths at the same price as last year. This company for the past several years has rendered excellent service in this area.

The commercial exhibit area will be open on Sunday from 1 p.m. to 5 p.m. and on Monday and Tuesday from 9 a.m. to 5 p.m.

An appropriation of \$1,775 has been approved.

Scientific Exhibits: Seventeen scientific exhibits by national and state governmental and voluntary health organizations will be on display during the entire meeting.

An appropriation of \$40 has been approved.

Special Exhibit: "Dentists in Gray," depicting dentistry during the

Civil War era, will again be on display during the 108th Annual Session. Prepared by the Library and History Committee under the direction of Dr. Neal Sheffield, Chairman, the exhibit was shown for the first time last year. Many features have been added.

Hospitality: This committee will be responsible for meeting essayists and speakers at the headquarters hotel and arranging for them to be properly entertained during their stay in Pinehurst, including accompanying them to all meetings, the reception, banquet and dance. Baskets of fruit and flowers will be delivered to VIP's rooms.

The committee is making arrangements also, for the informal social hour on Monday at 5 p.m. and special organ music will be supplied as background for the event.

No hospitality room will be provided this year.

An appropriation of \$225 has been provided.

Monitor: This committee will provide monitors for all meetings. Monitors will be on hand at least 20 minutes prior to starting time. They will be responsible for proper ventilation, lighting, operation of a "call board" and the proper decorum of those attending. The monitors will be identified with suitable arm-bands. Where hand microphones are used, monitors will handle them. Signs provided by the Arrangements Committee will be in place at all entrances to meetings, announcing the programs in progress. The monitors will assist the Arrangements Committee in setting up projectors, screens, black-out curtains and other equipment at all meetings.

Necrology: A simple service in memory of deceased members will be conducted on Sunday night at the beginning of the first General Session at 8:30 p.m. Music for the service will be provided by the UNC School of Dentistry Glee Club.

An appropriation of \$75 has been approved.

Program: The three nationally recognized clinicians selected for the scientific program, and the general topics of their presentations are: Dr. R. A. McEwen, Atlanta, operative dentistry; Colonel Frank C. Jerbi, Walter Reed Army Medical Center, Washington, D. C., oral surgery; Dr. Raymond E. Boudreaux, New Orleans, immediate dentures.

Dr. James P. Hollers of San Antonio, Texas, President of the ADA, will be guest speaker at the opening General Session on Sunday night. Dr. William A. Garrett, Fifth District Trustee, will report to the House of Delegates on Sunday afternoon. The Program Committee will be responsible for completing transportation arrangements for all essayists and speakers for arrival at and departure from the headquarters hotel. The Hospitality Committee will take care of their needs while at the hotel.

An appropriation of \$1,375 has been approved to cover honoraria and travel expenses of clinicians.

Publicity: This committee will provide adequate press coverage before and during the 108th Annual Session. Mr. Motte Griffith, an experienced newsman, has been employed to write pre-convention releases, to release news via the wire services at Pinhurst, and to assist in photographic coverage of the meeting.

An appropriation of \$250 has been approved.

Sports: Golf, skeet, fishing, tennis, and bowling tournaments will be scheduled on Sunday. All events will have a 75 cents entrance fee.

An appropriation of \$150 has been approved.

Visual Education: At the request of the Program Committee four appropriate, 30-minute scientific films have been selected to be presented immediately preceding the morning and afternoon scientific sessions Monday and Tuesday.

An appropriation of \$15 has been approved.

Resolutions

This report is informational in nature and no resolutions are presented.
Action by House of Delegates: Received for information May 12, 1964.

BLUE SHIELD-BLUE CROSS ADVISORY COMMITTEE

F. D. BELL (1964), *Chairman*

VAIDEN B. KENRICK (1965)

GROVER W. SMITH (1966)

Meetings: The Chairman and this committee have held several meetings with the Society's legal counsel in 1963 and 1964.

Assignments: The 1963 House of Delegates adopted the following resolution:

"Resolved, that representatives of the North Carolina Dental Society go before the Insurance Commissioner and the State Legislature, if necessary, to seek payment for all oral surgical procedures which are being performed by both physicians and dentists, and which are presently included in the general surgical contracts of the Blue Shield companies, and all insurance companies, and be it further

"Resolved, that the North Carolina Dental Society authorize the expenditure of a sum not to exceed five hundred dollars for the employment of legal counsel for this purpose."

Results of Study: After considerable searching of records of other states we believe that the Blue Shield-Blue Cross Companies will have to pay dentists for oral surgical procedures on the same basis that physicians are now being paid. In Illinois, a brief has been prepared for presentation to the Insurance Commissioner requesting that dentists be paid for oral surgical procedures on the same basis as physicians. Our attorney is at present preparing a similar brief which will be presented to the Insurance Commissioner of the State of North Carolina. This brief should be ready within the next few months. Up to the present time, less than \$100 of the \$500 appropriated by the 1963 House of Delegates has been used.

Resolutions

Resolved, that the North Carolina Dental Society grant an expenditure of a sum not to exceed five hundred (\$500) dollars for the continued services of legal counsel in behalf of direct payments to dentists in the surgical contracts of Blue Cross agencies in this state.

Action by House of Delegates: Adopted May 12, 1964.

CANCER COMMITTEE

ROBERT H. SAGER, *Chairman*

JOHN H. DIXON
Z. L. EDWARDS, JR.

RICHARD S. HUNTER
ALLEN T. LOCKWOOD

Meetings: No formal meetings of this committee were held.

Assignments: The committee received no assignments from the 1963 House of Delegates.

Educational Program Underway: In the summer of 1963 the Division of Oral Hygiene of the North Carolina State Board of Health was awarded a United States Public Health Service Grant to conduct an educational program in oral cancer detection. This program is designed

to provide the practicing dentist with the latest techniques and methods for the early detection of oral malignancies.

A teaching team composed of a dentist and a pathologist will conduct a seminar type of meeting about methods of cancer detection, with the principal emphasis on exfoliative cytology. Each dentist in the state will be afforded the opportunity to attend one of these programs. About thirty meetings are planned throughout North Carolina during the three years of the Public Health Grant. During the first year of the grant, twelve seminars have already been given.

Resolutions

This report is informational in nature and no resolutions are presented.
Action by House of Delegates: Received for information May 12, 1964.

CHILDREN'S DENTAL HEALTH COMMITTEE

JAMES A. CRAWFORD, *Chairman*

ROBERT M. KRIEGSMAN
LEWIS W. LEE

WILLIAM A. MYNATT
D. CLYDE YOUNG, JR.

Children's Dental Health Week 1964: Reports from over the state indicate that Children's Dental Health Week 1964 was successful.

Fifty-six outdoor billboard posters were placed in strategic locations, thanks to the co-operation of local dental societies and the advertising industry. The posters were furnished by the North Carolina Dental Society.

Coverage of the week was effectively carried out by local television and radio stations and newspapers, and for their fine co-operation we are most grateful. The Dick Van Dyke Show was followed by interviews with local dentists and apparently was well received.

Through the courtesy of the General Electric Company, 25 electric tooth brushes were distributed to local societies for prizes in poster and smile contests.

The attempt to have banks, telephone and other companies include leaflets with their statements was more successful this year.

In general, good use was made of materials supplied by Procter and Gamble Company, the Dairy Councils of North Carolina, and others.

Five hundred "Swish and Swallow" posters were provided by the Society and distributed in schoolrooms and cafeterias by local societies. These posters proved to be a very popular item by school nurses as well as school teachers.

Encomiums: Four individuals performed their tasks exceptionally well and should be mentioned. They are: Dr. James L. Winstead of Henderson, Dr. Charles L. Griffith of Forest City, Dr. Joe B. Roberson of Asheville, and Dr. Darwin McCaffity of Raleigh.

All mailing and handling of tooth brushes and other correspondence was carried out by our Executive Secretary, Mr. A. M. Cunningham, and his assistants. I am most thankful to them for this extra work.

Resolutions

This report is informational in nature and no resolutions are presented.
Action by House of Delegates: Received for information May 12, 1964.

CONSTITUTION AND BYLAWS COMMITTEE

Z. L. Edwards (1966) *Chairman*

G. SHUFORD ABERNETHY (1968)

T. G. NISBET (1965)

D. T. CARR (1964)

WALTER H. FINCH, JR. (1967)

Meetings: The committee met at the Central Office in Raleigh, February 23, 1964. All members of the committee were present.

Assignments and Actions: The 1963 House of Delegates referred to this committee a recommendation by the Advisory Committee to the University of North Carolina that said committee be made a standing committee. After study and discussion our committee concluded: (1) that the name of the committee be changed to "Dental Education Committee"; and (2) that it should be made a standing committee. An appropriate resolution appears at the end of this report.

The committee also considered a request of the Executive Committee that it "study possible amendments providing for remission of dues, and submit recommendations on the matter to the House of Delegates." It was noted that the Bylaws of all the District Societies provide that the Executive Committee is authorized to remit dues of members in unfortunate circumstances. An appropriate resolution is submitted at the end of this report.

The committee noted that the Bylaws provide that a member who has not paid current year dues by March 31 shall be declared delinquent, and that the ADA Bylaws had a similar provision. It was pointed out that since dues had to be received by the ADA March 31, it would be more practical to move the deadline date to March 1 on the state level. An appropriate resolution appears at the end of this report. It should be noted that if this resolution is adopted the District Societies should be requested to amend their Bylaws to conform with the change.

Resolutions

1. **Resolved**, that the Bylaws be amended by adding the following section to Article II:

"Section 18. The Dental Education Committee shall consist of ten members, two of whom shall be annually appointed for a term of five years. There shall be at least one member from each district society.

"The Dental Education Committee shall serve in liaison capacity to the School of Dentistry in this State," and be it further

Resolved, that the Constitution be amended by adding the following to Section 1, Article VII:

"Dental Education Committee."

2. **Resolved**, that the Bylaws be amended by adding the following section to Article VI:

"Section 10. In special cases due to disability, incapacitation for long periods of time, extreme misfortune, or other extenuating circumstances, the Executive Committee, by majority vote, may remit all or part of the state dues of a member for the current year, provided such action is recommended by the Executive Committee of the district society to which the member belongs."

3. **Resolved**, that Section 5 of Article VI of the Bylaws be amended by deleting "March 31" and substituting "March 1" therefor.

4. **Resolved**, that Article III, Membership, Section 2, of the Constitution be amended to read:

"Section 2. Active membership shall consist of members of the dental profession who are licensed by the North Carolina State Board of Dental Examiners and registered according to the dental laws of North Carolina and who are members in good standing of a district or component society such membership first having been approved

by the unanimous vote of the Executive Committee of the North Carolina Dental Society, of creditable professional attainments and of good moral character, having zeal for the profession and a proper regard for the varied obligations due from one member of the profession to another, this to be construed as meaning that a candidate for membership in a district or component society in order to obtain membership in such district or component society must also be approved for such membership in the district by the unanimous vote of the Executive Committee of the North Carolina Dental Society and membership in a district or component society constitutes membership in the North Carolina Dental Society."

5. **Resolved**, that Article IV, Membership, Section 1, of the Bylaws be amended to read:

"Section 1. Any member of a district society shall, upon election into the society, after first being approved by the unanimous vote of the Executive Committee of the North Carolina Dental Society, automatically become a member of the North Carolina Dental Society, and shall at the time and annually thereafter, pay to the Secretary-Treasurer of the North Carolina Dental Society, American Dental Association, District, and State Society dues, provided, that a student member of the American Dental Association, who has been licensed to practice dentistry in North Carolina, and who applies for active membership in the North Carolina Dental Society, shall, if elected, be exempt from dues for the remainder of that calendar year."

Action by House of Delegates: Resolutions 1, 2, and 3 adopted May 12, 1964. Resolutions 4 and 5 adopted May 13, 1964.

CORPORATE PRACTICE COMMITTEE

J. HARRY SPILLMAN, *Chairman*

HENRY C. HARRELSON, JR.

J. HENRY LIGON, JR.

T. EDGAR SIKES, JR.

E. C. KIRKENDOL

C. W. POINDEXTER

Meetings: The committee held a meeting February 9, 1964.

Assignments: The 1963 House of Delegates adopted the following resolution (Trans. 1963):

"**Resolved**, that an appropriate committee of the North Carolina Dental Society be directed to continue the study of the advisability and feasibility of seeking enabling legislation in the North Carolina General Assembly to permit dentists to incorporate, and be it further

"**Resolved**, that the purpose of this study shall be to seek to avail members of our profession of the favorable tax position accorded corporate retirement plans."

Result of Study: In the December 17, 1963 issue of the *Federal Register*, the Internal Revenue Service published its tentative regulations designed to govern the tax classification of professional service corporations. If implemented, these regulations would completely eliminate any tax advantage to these corporations. The American Dental Association, American Medical Association, American Bar Association, and many other professional groups in the thirty states where they are allowed, have filed briefs opposing these proposed regulations, and this will no doubt result in court decisions either favorable or unfavorable. Our committee decided it would be in the best interest of the North Carolina Dental Society to await the results of these hearings before seeking enabling legislation. An appropriate resolution appears at the end of this report.

Resolutions

Resolved, that the Corporate Practice Committee be continued in order to closely follow and report on the outcome of the hearings on proposed Internal Revenue Service regulations pertaining to Corporate Practice.

Action by House of Delegates: Adopted May 12, 1964.

DENTAL CARE FOR THE AGED COMMITTEE

HENRY O. LINEBERGER, JR., *Chairman*

C. Z. CANDLER, JR.
W. W. DEMERITT

RILEY E. SPOON, JR.
COYTE R. MINGES

Members of this Committee have been very active this past year serving as consultants to the State Welfare Department in forming a program of dental care for the aged under the provisions of the Kerr-Mills Act. This service has been rendered at the request of the Welfare Board.

Much of the work was done in meetings with the Medical Society, legislators, and various members of the Welfare Department and the Welfare Board.

It is the consensus of the Committee that this dental program may well be the foundation of all future state supported dental programs, and for that reason, must be approached and planned with care. The Committee further believes strongly: (1) that any State supported dental program must be supervised by a dentist; and (2) that remuneration to dentists for services rendered under the program should be on a currently just basis.

In order to determine reasonable and fair fees for dental procedures under the dental care for the aged programs, a sample survey of 73 dentists representing rural and urban areas throughout the State was conducted. Based on the returns from 42 of these dentists, a proposed fee schedule was prepared.

In its recommendations to the Welfare Board for the operation of the dental program under Old Age Assistance or Kerr-Mills, the Committee suggested the following guide lines:

(1) That a dentist be employed to supervise all operations of the dental program. This may be a part-time position at first.

(2) That, as far as possible, complete records, including a full series of X-rays be made on each eligible person on applying for treatment.

(3) That emergency treatment be given to eliminate pain, to include: extractions, sedative fillings, and minor curettage of periodontal problems.

(4) That wherever possible and whenever the money is available, complete dental service be offered, according to the fee schedule attached.

(5) That in the early stages of this program prosthetic dentistry not be considered as one of the expenses.

There will be no resolution submitted with this report. However, after a meeting of this committee with the Board of Welfare during the week of April 20, 1964, we will submit a supplemental report which may request action by the House of Delegates.

Resolutions

This report is informational in nature and no resolutions are presented.

Action by House of Delegates: Received for information May 12, 1964.

Exhibit #1

Dental Care for the Aged Committee

PROPOSED DENTAL FEE SCHEDULE

For treatment of cases under the Medical Care for the Aged Program by the North Carolina State Board of Public Welfare.

VISITS AND EXAMINATIONS

Examination and completion of treatment planning form.....	\$ 7.00
Office visit for treatment and observation of injuries to teeth and supporting structure, (other than placement of steel, crown, pulpotomy, etc. post-operative) including prescription and treatment or sedative filling.....	4.00
Professional visits to bedside.....	7.00
Special consultation fee.....	8.00
Prophylaxis treatment (to include scaling and polishing).....	6.00
*Topical application of sodium fluoride (Series of four treatments, including prophylaxis).....	16.00
*Topical application of stannous fluoride (One treatment, including prophylaxis).....	12.00
Periodontia treatment, 1 tooth—\$25 maximum.....	4.00
Removal of Hypertrophied gingival areas (polyps).....	13.00
Emergency treatment, palliative.....	5.00
AgNo application. Fluoride paste or other medication to a tooth surface to inhibit caries or to desensitize the area.....	4.00
Vitality test with pulp tester.....	4.00

RADIOLOGY AND PATHOLOGY

Single film.....	3.00
Additional films (up to and including a total of 13 films) each..	2.00
Entire denture series consisting of at least 14 films.....	15.00
Intra-oral, occlusal view, maxillary or mandibular, each.....	6.00
Superior or inferior maxillary, extra-oral, one film.....	6.00
Superior or inferior maxillary, extra-oral, two films.....	12.00
Biopsy of oral tissue.....	13.00
Microscopic examination.....	10.00

EXTRACTIONS

Single with local anesthesia.....	5.00
Each additional tooth.....	4.00
Surgical removal of erupted teeth, per operation additional.....	10.00
Post-operative visit. (Extraction other than yours).....	3.00
Impacted teeth:	
Removal of tooth (soft tissue).....	15.00
Removal of tooth (partially bony).....	24.00
Removal of tooth (completely bony).....	35.00

ROOT CANAL THERAPY

Palpa therapy:	
*Pulp capping.....	5.00
*Therapeutic pulpotomy.....	10.00
*Vital pulpotomy.....	15.00
Extirpation of pulp, treatment, filling root canal, roentgenogram:	
Single rooted tooth canal therapy.....	35.00
Bi-rooted tooth canal therapy.....	55.00
#Tri-rooted tooth canal therapy.....	75.00
#Apicoectomy.....	25.00

RESTORATIVE DENTISTRY

Amalgam fillings; Permanent teeth:	
Cavities involving one tooth surface.....	5.00
Cavities involving two tooth surfaces.....	9.00
Cavities involving three or more tooth surfaces.....	12.00

Gold fillings and inlays:

#One tooth surface.....	\$ 26.00
#Two tooth surfaces.....	40.00
#Three or more tooth surfaces.....	53.00
Silicate cement filling.....	6.00
Acrylic or plastic filling.....	8.00

Crowns:

Acrylic jacket	50.00
Acrylic jacket (gold lingual).....	65.00
Porcelain jacket	67.00
#Porcelain jacket (crown with metal).....	85.00

Gold: with heavy cast cusps or all cast:

#Molar	55.00
#Bicuspid	50.00
#Cuspid or incisor.....	50.00
#Three quarter of any tooth.....	50.00
Stainless steel: Permanent tooth.....	24.00
#Pontics: Cast gold, posterior (Sanitary).....	40.00

Gold and porcelain:

#Steele's facing type.....	46.00
#Tru-Pontic type	50.00

Removable:

One piece casting, gold or chrome cobalt alloy clasp attachment (all types).....	100.00
#Pontic (including tooth).....	30.00

Recementing:

Inlay	5.00
Crown	5.00
Bridge	8.00

Repairs, crowns and bridges:

Replace broken pin facing with Bryant's repairs.....	15.00
Replace broken pin facing with Steele's repairs.....	12.00
Replace broken Steele's facing where post backing is intact....	10.00
Replace broken Steele's facing where post backing is broken..	20.00

PROSTHETICS

Dentures:

Full upper or lower: Acrylic.....	103.00
Partial upper or lower without clasps: Acrylic.....	63.00
Partial upper or lower with two gold or chrome cobalt alloy clasps with rests: Acrylic.....	105.00
Partial lower with cast gold or chrome cobalt alloy lingual bar and two clasps: Acrylic.....	135.00
Partial upper with cast gold or chrome cobalt alloy palatal bar and two clasps: Acrylic.....	141.00
Clasps additional, gold or chrome cobalt alloy.....	18.00
Denture adjustment (other than your own).....	4.00

Repairs, dentures, Acrylic:

Broken denture, repairing (no teeth involved).....	10.00
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Broken denture (teeth involved):

First tooth	8.00
Each additional tooth.....	3.00

Adding teeth to partial denture to replace extracted natural teeth:

First tooth	16.00
Each additional tooth.....	5.00
Replacing clasp on denture, clasp intact.....	10.00
Replacing broken clasp on denture with new clasp.....	20.00

* Mainly for children's dentistry.

Luxury dentistry.

DENTAL CARE FOR THE AGED SUPPLEMENTAL REPORT NUMBER I

Attached is a copy of the proposal submitted to the State Board of Welfare on April 23, 1964.

The Commissioner of Welfare indicated that the Welfare Department, because of limited funds, had transferred some of the dental appropriation to "more needy" areas, and instead of the \$1,000,000 per year for dental procedures we were cut down to approximately \$276,000.

The committee, with the help of several dentists throughout the state, went to work contacting members of the Board of Welfare. The result was that at the meeting of the Board of Welfare on April 28, \$519,000 was allocated to dentistry for this year.

This amount, we feel, was a definite compromise and enough for the dental program to get started on. We are sure there are still many facets to be worked out, but we believe we have made a good start.

Resolutions

1. **Resolved**, that the action of the Dental Care for the Aged Committee in its negotiations with the State Board of Welfare be approved.

2. **Resolved**, that the Dental Care for the Aged Committee be authorized to continue negotiations on a dental program for the aged until a sound program is operating.

3. **Resolved**, that the dentists of North Carolina be encouraged to participate in the program of dental care for the aged.

Action by House of Delegates: Resolutions 1, 2 and 3 adopted May 12, 1964.

Exhibit #1**Dental Care for the Aged Committee
Supplemental Report Number 1*****PROPOSAL TO STATE BOARD OF WELFARE
ON
DENTAL PROGRAM FOR MAA AND OAA
April 23, 1964**

In response to your request for statistics on Dental Services under the Old Age Assistance and the Kerr-Mills Program, we offer the following findings.

Based on the estimated 214,000 (43,000 OAA and 171,000 MAA) eligible people receiving needed dental care on percentage found in a recent report by Dr. John Hughes, Department of Oral Hygiene, "Natural History of Dental Disease in North Carolina, 1960 Age 60 and Over," and using the proposed fee schedule of Dental Treatment presented to the Board on February 27, 1964, we estimate the cost as follows:

27,000 people need full dentures at \$206.00/case.....	\$5,562,200
256,992 cavities in entire group filled at average \$8.00/cavity..	2,225,550
17,521 people with gingivitis — with complete prophylaxis at \$6.00	105,126
37,880 people with acute periodontitis correctional treatment at \$25.00 max.....	947,000
	<hr/>
	\$8,839,876

It is estimated that \$8,839,876.00 would be needed to correctly and permanently treat these 214,000 people. However, we feel sure that by no means will 100 per cent of these people seek dental treatment. In fact, referring to the same report by Dr. John Hughes—

9.1 per cent of these people visited the dentist in the past six months
14.0 per cent of these people visited the dentist in the past twelve months
7.0 per cent of these people visited the dentist in the past eighteen months

30.1 per cent of total in the last eighteen months

* Presented by Dr. Henry O. Lineberger, Jr., Chairman, Dental Care for the Aged Committee, North Carolina Dental Society.

But there is no way of knowing exactly what will happen under such a program with such new approaches to dental services.

We of the Committee on Aging of the North Carolina Dental Society believe that the demand for dental treatment, in the beginning, will be such that with the possible exception of denture service, all requested dental services could be afforded by the allotted \$1,000,000 per year with payments made to the dentist in accordance with the fee schedule presented on February 27, 1964.

In order to start a dental program that will be both realistic and in keeping with the high standards of dentistry now practiced in North Carolina, we recommend that the following program be considered.

- 1) A dental director be secured by the Department of Welfare as a consultant and director of this program. This may be a part-time position at first, but soon, if our statistics are correct, the demand will require a full-time dentist. We suggest that this dentist be paid for by the 10 per cent set aside for "administration service."
- 2) That in as many cases as possible, a complete examination be made including charting of the teeth, surrounding tissues, and X rays. This should be done to begin a basic file system of the program and to prevent misuse of services. The estimate cost would be:

25,000—Charting and examination \$7.00.....	\$175,000
25,000—X-rays examination (full series) \$15.00.....	375,000
	\$550,000
- 3) That all emergency treatment to alleviate pain be given. This is to include extraction of involved teeth, placement of sedation fillings, curettage of minor periodontal pockets, and simple repair of broken dentures. The cost of the treatment would be:

Extraction—first tooth—40,000 @ \$5.00/tooth.....	\$200,000
Extraction—second tooth—15,000 @ \$4.00/tooth.....	60,000
Sedation fillings—25,000 @ \$5.00.....	125,000
Periodontal curettage—10,000 @ \$5.00.....	50,000
Simple denture repair and alteration.....	50,000
	\$485,000
- 4) That at the present no denture program can be undertaken because of the limitation of funds.
- 5) That any work or extension of the program use the Fee Schedule presented on February 27 as the guide.

COUNCIL ON DENTAL HEALTH AND INFORMATION

W. L. HAND, JR., 1966, *Chairman*

FRANK G. ATWATER (1967)

L. B. PEELER (1964)

E. A. PEARSON, JR. (1968)

W. D. YELTON (1965)

Meetings: The committee met on November 24, 1963, in Raleigh.

Assignment: The 1963 House of Delegates adopted the following recommendations pertinent to this Council:

1. That the responsibility of coordinating and implementing a Careers in Dentistry Program in the best interest of the profession be assigned to the proper standing committee by the president, or that he appoint a special committee for this purpose.

This responsibility was assigned to the Committee on Dental Health and Information by President S. B. Towler.

The Careers in Dentistry Program: The problems facing our profession

relative to the future of dental manpower in our state merits our immediate individual and collective consideration and action. Through the media of the *Newsletter*, THE JOURNAL OF THE NORTH CAROLINA DENTAL SOCIETY, and the District Officers' Conference, the problems, the opportunities, and the need for action have been presented to the dentists of the state.

To aid dentists in their approach to those individuals interested in Careers in Dentistry, an information kit is available from the Central Office containing:

1. Motivational literature for prospective dentists, dental assistants, laboratory technicians, and oral hygienists;

2. A brochure explaining each phase of dental careers, the career schools in the region, scholarships available, prerequisites, employment opportunities, and source reference for further information;

3. A *Dental Students Register* that contains all dental schools and schools of oral hygiene in the United States, admission heads, prerequisites, cost, place and time of dental aptitude testing programs; and

4. A brief cover letter explaining the contents of the kit. *Results and Conclusions:* Over 140 kits were distributed to dentists responding to the information of their availability as published in the *Newsletter*. To further stimulate and guide these young people, a Dental Career Day was held at the School of Dentistry in Chapel Hill on April 25, 1964. It was the consensus of the committee that the primary responsibility for interesting young people in Careers in Dentistry lies within the province of each individual dentist.

To reach many individuals interested in dental careers that were not in contact with the dentists, the one hundred seventy-three (173) Guidance Counselors in the state high schools were supplied with these Dental Career Kits.

An exhibit "Careers In Dentistry" has been prepared by the Central Office. This exhibit was displayed at the Health Fair at Duke Indoor Stadium, April 1-4, sponsored by the Durham-Orange County Medical Foundation. Over 50,000 school children, counselors and parents attended this fair.

The exhibit was also displayed at "Career Week" in Raleigh Memorial Auditorium April 6-8.

The exhibit will be on display at all District Meetings this coming fall and at Career Congress meetings during the next year.

To represent our profession at these Career Congresses, the state will be divided into six (6) districts, with each district having a District Dental Career Day Coordinator. This District Coordinator, in turn, will coordinate Career Day activities by asking dentists to man the exhibit and present programs at the Health Career Congresses.

When the Health Fairs presented information on careers to over fifty thousand (50,000) students, which included twenty (20) exhibits, by our medical brothers, it is apparent our efforts need to be intensified, but selective. The profession is urged to interest those youngsters that possess the qualities that would lead to a mature, professional person — qualities such as digital dexterity, mental aptitude, mental attitude, moral character, personality, and a desire to serve others, with the realization that we must supply factual information, the disadvantages as well as the advantages, to guide and direct these individuals along the paths they seek.

Dental Public Health: It is appropriate in this report to note that for the past forty-six years the State of North Carolina and the North Carolina Dental Society have enjoyed an enviable reputation for its dental public health program. North Carolina was the first state to initiate a dental public health program as a component of its state health department. That we have had a dental public health program since 1918 has perhaps caused some of us to take this for granted, and in so doing we have not fully understood the purpose of the program.

The Division of Oral Hygiene continues to promote a dental public health program in the public schools of our state. During 1963 the

Division of Oral Hygiene had all 23 positions for public health dentists filled. With major emphasis being placed upon dental health education as a means of improving dental health, the staff of dentists gave 2,711 classroom lectures at which 101,470 children were present. Dental services were rendered in the schools to medically indigent children.

Dental health education programs were presented in only forty-eight counties during 1963 by the Division of Oral Hygiene. With this record you can appreciate the need for more dentists to provide more programs to more children and more counties. The Director of the Division has requested additional funds at each of the past two legislative sessions in order that the program of dental health could be expanded to more counties. The legislature has not provided additional funds for this program. Each member of our Society should take note of this and make efforts to gain support for our dental health program in the coming legislature.

The Division of Oral Hygiene devotes a great deal of time to the promotion of communal fluoridation programs. The number of communal water supplies being fluoridated continues to increase. In January 1963 there were thirty-nine towns fluoridating — these towns serving a population of 1,199,882. At the close of the year, December 31, 1963, there were forty-five towns using fluoridated water and serving a population of 1,226,482, a gain of 26,600 population. At the present time there are several towns in various stages of development preparing to add fluorides.

The Division of Oral Hygiene during 1963 was engaged in five ongoing research projects within the state.

Resolutions

Resolved, that the North Carolina Dental Society reaffirm its endorsement and support of the dental health program of the Division of Oral Hygiene of the North Carolina State Board of Health, and be it further

Resolved, that the North Carolina Dental Society go on record supporting the request for additional funds from the North Carolina State legislature by the Division of Oral Hygiene in the continuance and expansion of the dental public health program.

Action by House of Delegates: Adopted May 12, 1964.

DENTAL HYGIENISTS STUDY COMMITTEE

GEORGE S. ALEXANDER, *Chairman*

BARRY G. MILLER

FREEMAN C. SLAUGHTER

CLAIBOURNE W. POINDEXTER

G. CURTIS WILSON

At the final session of the 1963 House of Delegates of the North Carolina Dental Society, there was considerable discussion relating to dental hygienists. Several delegates expressed concern over the evident shortage of dental hygienists in North Carolina.

Motions and resolutions had been declared "out of order" for this final session of the House of Delegates, but because of the interest shown by the delegates, President Towler, on November 11, 1963, appointed this special committee to make a study of the dental hygienists situation in the State and report its findings to the House of Delegates in 1964.

To accomplish this assignment members of this committee held several meetings and talked with many people for information. This report is a resumé of that information.

From the outset it was obvious that a shortage of dental hygienists exists in North Carolina and that this shortage is becoming more acute every year.

1. There is an inadequate number of hygienists available to meet the needs of the dentists who practice in the large cities and want hygienists, and apparently none are available for dentists practicing in the smaller towns and rural areas.

The *Survey of Dental Practice* records that in
 1952—6.6 per cent of dentists employed full-time dental hygienists (1956—
 p. 21)
 1955—8.6 per cent of dentists employed full-time dental hygienists
 1958—6.5 per cent of dentists employed full-time dental hygienists (1959—
 p. 30)
 1958—14 per cent of dentists employed full-time or part-time dental hy-
 gienists (1959—p. 29-30)
 1961—5.7 per cent of dentists employed full-time dental hygienists
 1961—15.0 per cent of dentists employed full-time or part-time dental
 hygienists
 1963—accurate figures are not available for North Carolina, but it is esti-
 mated that fewer than 4.0 per cent of the dentists employ full- or
 part-time dental hygienists.

2. The shortage of hygienists also increases the shortage of practicing dentists. If dental hygienists were available to relieve the dentist of a part of his work load by doing prophylaxis, patient education, and other services for which the dental hygienists are trained, then the dentist would have these additional hours to render services that only he as a dentist is capable of rendering.

Increasing the number of hygienists would in effect increase the number of available dentists, and thus reduce the much publicized shortage of dentists. This increase would be accomplished at a substantially lower cost to the public than educating an equal number of dentists to perform hygienists' duties.

3. Because of the shortage of hygienists in North Carolina, starting salaries are at an unrealistic level. The training of a dental hygienist takes two years (or eighteen months in school). The time required to train a registered nurse is three years (or thirty-six months in school). Therefore, it would appear that the starting salary for a registered nurse should be more than that of a dental hygienist, but it is not. Starting salary for registered nurses in North Carolina is approximately \$280.00 per month, while starting salary for dental hygienists in North Carolina is \$600.00 and more per month.

This committee's attention was directed to an advertisement in the *Durham Morning Herald* for Friday, November 1, 1963. There was a large advertisement addressed to "Dental Hygienists." An Asheville dentist was offering a starting salary of \$600.00 per month.

At the present time the University of North Carolina School of Dental Hygiene accepts fifteen girls annually. Three of these will not complete the two-year course. Upon graduation one-third ($\frac{1}{3}$) of the graduating number are lost from practice within two years, and one-half ($\frac{1}{2}$) are lost within three years. This leaves approximately six girls a year available to be employed as dental hygienists in North Carolina. At this time in North Carolina there are approximately 1,500 practicing dentists and between 50-75 practicing hygienists. Each year the University of North Carolina graduates fifty or more dentists and graduates from other states come to North Carolina to practice, but only about six hygienists become available each year. It is obvious that the need for hygienists grows more acute.

In committee discussions several methods were proposed to increase, as soon as possible, the number of available hygienists. Each method suggested was studied and discussed. It is the opinion of the committee that the following three proposed plans have the most merit.

1. Preceptor Training by qualified dentists throughout the state.
2. Immediately increasing the size of the next class at the existing University of North Carolina School of Dental Hygiene.
3. Establishment of additional schools of hygiene at the community college or post-high school vocational training center level about the state.

Preceptor Training: In the early discussions of this committee Preceptor Training, such as that used in Alabama and Georgia, seemed to have much to offer because it would train as many hygienists as needed within a two-year period. (Resumé of the Alabama Preceptor System:

Any practicing dentist can qualify as a preceptor teacher by applying for a Training Permit from the Board of Dental Examiners and can then employ any girl who is a high school graduate (or its equivalent) and who has been a dental assistant for one year, as a trainee in his office. After one year of office training and a two-week formal course the girl is eligible, just as our college trained hygienists are now, to take an examination given by the State Board of Dental Examiners. If the trainee passes the examination given by the State Board of Dental Examiners, she is then licensed as a dental hygienist.)

As was stated before, Preceptor Training has the desirable feature of being a plan whereby hygienists in adequate numbers would be available soon.

However, Preceptor Training likewise has several undesirable features:

1. When training leaves the area of formal academic curriculum, the standard of quality begins to fall.
2. The trainee's scope of experience would be limited somewhat to the methods practiced by one dentist, rather than several.
3. For two years an inadequately trained girl may be turned loose on the public to do irreparable harm to patients who cannot know that she is inadequately trained.
4. Preceptor trained hygienists would encounter difficulty in becoming licensed in other states. (This factor would help keep preceptor trained hygienists in North Carolina, but may cause North Carolina to lose to other states some of the most capable girls who plan a career in dental hygiene. They may go to states which still have formal curriculum training because of its better acceptance across the country.)
5. Some dentists in other states have used this so-called training period as an excuse to pay exceedingly low salaries to an assistant for two years, while she receives very little training toward a career in dental hygiene.

No one on this committee is in favor of lowering the standard of hygiene practiced in North Carolina; therefore, members of this committee have reservations against advocating Preceptor-Type Training for dental hygienists.

Immediate Enlargement of Existing University of North Carolina School of Hygiene: The committee feels that enlargement of the next class of Dental Hygiene at the University of North Carolina would be a most satisfactory method of obtaining a greater number of adequately trained dental hygienists quickly.

1. The present school is available and operating, and it is accredited by the American Dental Association.
2. The high quality faculty, the classrooms, and the clinical facilities are easier to expand than to create. If immediate expansion were accomplished a greater number of hygienists could be trained without undue expense for equipment and buildings. It appears that the number could be increased from fifteen to thirty without adding any faculty except one teaching hygienist to maintain accreditation standard.

When members of this committee met with Dr. John Brauer, Dean of the School of Dentistry, University of North Carolina (December 17, 1963), and asked if the School of Dental Hygiene could be increased immediately, perhaps to thirty, he stated that it could not. He informed the committee that no increase could be made until completion of the new basic science building. He further pointed out that the House of Delegates of the North Carolina Dental Society in 1958 agreed on a pattern of expansion at the dental school from the present fifty students to seventy-five students in 1970, along with an increase in the number of graduate students and an increase in the number of dental hygienists from the present fifteen to sixty each year.

He expressed an opinion that if everything goes according to clockwork, the earliest possible date that the University of North Carolina could graduate sixty hygienists would be 1969, and more than likely it will be 1971.

Even if the class at the University of North Carolina were increased to sixty (60) immediately, the minimum *need* would not be met in North Carolina because of the high rate of attrition. Therefore, even before the committee learned that an increase at the University of North Carolina was not possible, a third plan was advocated to supplement the University of North Carolina program.

Establishment of Additional Hygiene Schools at the Community College and Post-High School Vocational Training Center Level About the State: North Carolina should have several Schools of Dental Hygiene. A school could be created at the community college or post-high school vocational training center level that would be as good, and perhaps better, than the present school at Chapel Hill, with the added advantage that the trainee could attend school closer to home at a saving in cost.

Also, the tax paying people of North Carolina would save money because the cost of educating a hygienist at Chapel Hill is estimated to be twice and maybe four times as much as the cost would be at the community college or post-high school vocational training center level.

Therefore, this committee believes that the president of a community college or vocational training center located in or near a city such as Charlotte, Wilmington, or Asheville, should be approached and requested to set up a School of Dental Hygiene immediately.

Two questions are often raised as to where qualified teachers could be obtained to teach basic sciences and dental courses at these schools which are not a part of the dental school, and where the funds could be obtained.

Teachers: Obtaining good teachers does not appear to be a serious problem. Selection of the faculty should be left entirely to the college administrators. They are qualified to select their own faculty and will obtain the necessary teachers. Community colleges and vocational institutions already have faculties capable of teaching the basic science courses. Also, in any one of the cities mentioned before and its surrounding area there are capable dentists who would be willing to help with the program if called upon, either in an advisory capacity or as part-time teachers.

Funds Are Available: There are several sources of money available to establish a School of Dental Hygiene.

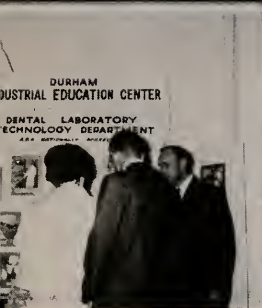
1. Money has already been appropriated by the North Carolina Legislature to establish training courses at the post-high school training level in a wide variety of subjects, including algebra, bacteriology, bookkeeping, nursing, auto mechanics, and others.

It is the understanding of this committee that a vocational school could obtain funds for a School of Dental Hygiene through the following procedures.

A group of dentists representing the local dental society would go to the vocational school administrator and show the need for dental hygienists and request that a training program for dental hygienists be activated. This group of dentists would furnish the administrator a detailed listing of needed equipment and teachers to assure accreditation of the program, and would agree to serve as a board of advisors to assist whenever needed.

Because a local group requested his school to set up a training program to assist community development, the school official could then apply for state funds. He should experience little or no difficulty in obtaining sufficient funds after pointing out the immediate employment opportunities available to graduates of this program.

2. *Federal Legislation* enacted in 1963 has made money available. Specifically, the "Higher Education Facilities Act of 1963" made funds available for construction, classroom improvements, laboratory facilities, curriculum development, et cetera, for graduate and under-graduate programs in community colleges and vocational training institutions. (It should be noted here that some health teaching programs are not eligible to receive funds under this act — specifically, those programs covered by HR 12 — since no overlapping of federal funds is allowed.



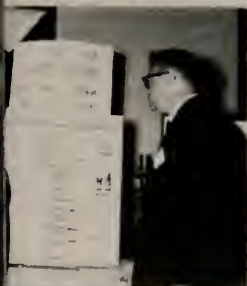
107th Annual Session





inehurst—May 10-13, 1964

Photos by J. Ernest Roberts and A. M. Cunningham



Dental hygiene programs are not eligible to receive funds under HR 12. Consequently they would be eligible for funds under the Higher Education Act.)

Already the federal government has allocated to North Carolina for 1964, for undergraduate study, \$6,086,000. This amount is set up to add support to the state-appropriated money, grants, bonds, and other funds for education. The money is available on a matching basis according to the potential enrollment and the amount allocated by North Carolina.

3. *The Kellogg Foundation* has money available for programs of this type. In Florida three Schools of Dental Hygiene have been activated recently. The Florida State Dental Society made \$10,000 available to each of the three schools and the Kellogg Foundation provided \$70,000 to each school for equipment and buildings. The School of Dental Hygiene at Key West accepts forty (40) students each year.

4. Some Government Agencies have used and surplus dental equipment which would be available for this type program at a small cost, should it be needed.

This committee believes that a dental hygiene program in a community college or vocational training center would be very successful, but, rather than create something of unknown value without adequate control and safeguards, the committee feels that any program of this importance should be set up with the understanding that it will be thoroughly reviewed in depth in three to five years and re-evaluated at that time. If the program is rendering a good service to the people of North Carolina it should be implemented and expanded, and additional schools started in other cities. If the program has not proved itself satisfactory in every way, then corrective measures should be applied or the program discontinued.

Summary of Need:

1. North Carolina has an acute shortage of dental hygienists.
2. The dentists are not interested in obtaining adequate numbers of dental hygienists by reducing the quality of training.
3. The future need for dentists and hygienists will greatly increase due to:
 - a. Dental Insurance Programs and Service Corporations
 - b. North Carolina's increasing population
 - c. Increasing awareness by the public of the importance of dental care for good appearance and health.

Resolutions

1. **Resolved**, that more dental hygienists are needed in North Carolina.
2. **Resolved**, that the President of the North Carolina Dental Society appoint a committee, or instruct the proper committee, to meet with the Dean of the School of Dentistry, University of North Carolina and, in the name of the Society, request an increase in the class of dental hygienists to thirty (30), beginning with the class to be admitted this fall (1964).
3. **Resolved**, that the President of the North Carolina Dental Society appoint a special committee to activate a program to establish additional Schools of Dental Hygiene immediately.

Action by House of Delegates: Resolutions 1, 2, and 3 adopted May 12, 1964.

DENTAL SERVICE CORPORATION COMMITTEE

ROY L. LINDAHL, *Chairman*S. H. ISENHOWER
WESLEY E. KELLEY
PEARCE ROBERTS, JR.PAUL FITZGERALD, JR.
J. S. D. NELSON
DAN WRIGHT

JAMES M. ZEALEY

Meetings: The Committee did not hold a meeting in which the entire group was present.

Assignments: The 1963 House of Delegates adopted the following resolutions (Trans. 1963:432):

"Resolved, that a dental service corporation be established in 1963 as a prepayment plan in the State of North Carolina with the provision that the corporation be activated only when a demand for its services is presented, and be it further

"Resolved, that control of the dental service corporation be kept within the dental profession; fees for services be based on a new survey of fees made among members of the North Carolina dental profession and fees for services be reviewed annually and adjusted where necessary.

"Resolved, that authorization be made for funds, not to exceed three hundred dollars, to cover the cost of legal fees involved in incorporating a North Carolina Dental Service Corporation."

Activity During the Year: Attempts were made during the year to inform the membership of the North Carolina Dental Society at the district level of the nature and purposes of a dental service corporation. These were the first attempts to educate, at the "grass roots" level, the practitioners in the State so they would understand what a dental service corporation is or could be.

The Chairman had meetings with representatives of the Dental Service Corporations from other states and interested dentists from other states who expressed opinions in favor of and against dental service corporation activities. Due to the apparent concern on the part of many members of the profession nationally, it seemed advisable to take a closer look at the potentials for a dental service corporation.

The Chairman had a lengthy meeting with the North Carolina Dental Society's legal counsel to explore the possibility of establishing a dental service corporation in the State of North Carolina. The advice of legal counsel suggested that it may not be appropriate to establish the dental service corporation without actually activating the plan. It was deemed that further investigation of other plans would be advisable and that no action would be taken until complete clarification of the situation, as it relates to North Carolina, by examination of the statutes currently in effect, and following consultation with the Insurance Commissioner of the State.

In order to activate a dental service corporation, we have been advised that a charter for incorporation must be drawn and approved by the Insurance Commissioner. Included in this document must be a statement of services to be rendered and fees to be charged. A specimen contract must be filed with the Insurance Commissioner along with the schedule of rates to be paid. In addition, the Insurance Commissioner must approve all rate changes. There are other requirements which insurance programs must meet, and apparently the dental service corporation must also meet these specifications. Legal counsel specifically made it clear this is an insurance company and legally will be considered as such. In effect this is the dental profession going into the insurance business.

Following accumulation of additional material, it seems appropriate to recommend the approval of the resolutions which were adopted last year. Accordingly, they appear at the end of this report.

Resolutions

Resolved, that authorization be made for funds, not to exceed three hundred dollars, to cover the cost of further study involved in incorporating a North Carolina Dental Service Corporation.

Action by House of Delegates: Adopted May 12, 1964.

ETHICS COMMITTEE

THOMAS M. HUNTER (1967), *Chairman*

A. C. CURRENT, JR. (1964)

H. K. THOMPSON (1966)

W. STEWART PEERY (1965)

NORMAN F. ROSS (1968)

Meetings: The committee held no formal meetings. All business was conducted by correspondence or telephone.

Assignments: The committee received no assignments from the 1963 House of Delegates.

The usual requests for information and rulings were received. All these were handled on the district level with the Chairman of this committee in consultation. The Chairman supplied one lecture on the Code of Ethics of the North Carolina Dental Society to the graduating class at the University of North Carolina as indoctrination.

Resolutions

This report is informational in nature and no resolutions are presented.

Action by House of Delegates: Received for information May 12, 1964.

INDUSTRIAL COMMISSION ADVISORY COMMITTEE

S. L. BOBBITT, *Chairman*

T. G. COLLINS

E. D. BAKER

The Chairman of the North Carolina Industrial Commission Compensation Act requested assistance from the North Carolina Dental Society in revising the services and the fee schedule for treatment of cases subject to the provisions of the North Carolina Workmen's Compensation Act.

Some new services were added, and a substantial increase in fees was provided in most segments. These revisions were reflected in a new fee schedule published in January 1964.

Resolutions

This report is informational in nature and no resolutions are presented.

Action by House of Delegates: Received for information May 12, 1964.

INSURANCE COMMITTEE

JOHN S. DILDAY (1966), *Chairman*

T. L. BLAIR (1964)

CHARLES T. BARKER (1967)

C. DON GERDES (1965)

J. S. D. NELSON (1968)

Meetings: The committee held a meeting on September 22, 1963.

Assignments: The House of Delegates adopted the following resolution (Trans. 1963:421)

"Resolved, that the Insurance Committee be authorized to initiate a plan on a state-wide basis for the purchase of professional liability

insurance by members, to the end that such plan might eventually result in rate reduction and a consequent saving to the members."

Results of Study: During a lengthy discussion, the following points were brought out:

1. The Insurance Code of North Carolina does not permit group programs of casualty insurance. However, if approximately 50 per cent of the membership were to enroll in a program, the company administering the program would begin the accumulation of premium and loss data. The initial premium would be that established by the Insurance Commissioner. After two full years of experience (three years from starting date) the company would file the accumulated data with the Insurance Commissioner and request a lower rate.

2. No company can promise a rate reduction, but granted a favorable loss experience, a rate reduction by the Insurance Commissioner is entirely possible.

3. The question was raised of what would happen if the experience was unfavorable. No one had the answer, but the possibility of a rate increase was implied by the question.

4. It was reported the Medical Society had received no rate reduction in its professional liability program which has been in effect for several years.

5. It was suggested that if a professional liability program was initiated, consideration should be given to including premise liability and comprehensive personal liability in the program on an optional basis. Such a "package deal" might be found to be advantageous.

6. The probability of getting the 50 per cent participation necessary to establish a rating experience was questioned. It was felt that many members would be reluctant to take their liability insurance away from local agents.

7. Because of the favorable experience in North Carolina through the years, it was pointed out that the rate was below that of other areas, and that only a small saving might be expected even if the group qualified for a rate reduction.

8. It was suggested that an individual dentist might experience a substantial saving by buying a package liability program from his own local agent. It was pointed out that fire insurance and premise liability rates were not uniform, but were based on local factors.

9. The advantages of settling claims through a local agent were stressed. After thorough discussion and consideration of the points brought out concerning professional liability insurance for the membership, the committee decided that it is not feasible or advantageous to establish such a program at this time.

Resolutions

This report is informational in nature and no resolutions are presented.

Action by House of Delegates: Received for information May 12, 1964.

LEGISLATIVE COMMITTEE

H. ROYSTER CHAMBLEE (1965), *Chairman*

S. W. SHAFFER (1964)

DENNIS S. COOK (1967)

PAUL E. JONES (1966)

L. C. HOLSHOUSER (1968)

1963 Legislation: The committee is pleased to report that by direction of the 1962 House of Delegates two bills were proposed and submitted to the 1963 General Assembly:

HB 549 to eliminate from the General Statutes the nomination of a member of the Medical Care Commission by the North Carolina Dental Society.

HB 550 to eliminate from the General Statutes the provision for a

representative of the North Carolina Dental Society as a member of the Mental Health Council.

Both bills were ratified May 1, 1963.

The 1963 House of Delegates directed the Legislative Committee to make certain that dentists were protected by the two so-called "Good Samaritan" Bills (HB 735 and SB 366). The committee took the proper steps, but both bills were killed in committee.

The committee opposed HB 1114 which would have authorized the governing authority of any municipal corporation in the state to hold referendums on the question of fluoridation. However, the content of the bill was changed so that it applied only to the city of Burlington and was subsequently ratified.

The 1963 General Assembly ratified SB 182, creating a State Department of Mental Health. The committee unsuccessfully tried to have this bill amended to provide that a dentist be included on the State Board of Mental Health.

Through the efforts of the committee, HB 1168 relating to the practice of pathology was amended so as not to affect the practice of dentistry. Subsequently, action on the bill was postponed indefinitely.

Efforts were also unsuccessful to have a dentist appointed to the Medical Advisory Council to the State Board of Mental Health created by HB 786.

The committee supported the Medical Society and other voluntary health associations in the passage of SB 8, Medical Assistance to the Aged, and SB 423, appropriating \$750,000 for Medical Assistance to the Aged. Both bills provide for the implementation of the Kerr-Mills Act in North Carolina to give medical aid to persons 65 and over who are not on welfare rolls, but who lack resources for major, catastrophic, medical expenses.

Subsequently, the State Board of Welfare took advantage of permissive language in the bill, decided against implementing the Kerr-Mills program, and voted to expand Medical Assistance within the existing welfare framework. The Board's action has been severely criticized by the Medical Society and other health groups for completely ignoring the intent of the legislation.

Dentists File for Senate Seats: Two members of the Society will seek Democratic nominations for state senate seats in the primary, May 30.

Dr. Dennis S. Cook of Lenoir who has served twice in the General Assembly is a candidate for Senator from the new Burke-Caldwell district (32nd).

Dr. W. T. Ralph of Belhaven is seeking a senate seat from the second district composed of Beaufort, Dare, Hyde, Tyrrell and Washington counties. Dr. Ralph is a former Mayor of Belhaven and served on the Beaufort County Board of Education.

Dentists in Politics: It is essential that dentists become informed, interested, active, and identified with political candidates during their campaigns if dentistry is to retain its identity, stature, freedom, and usefulness.

Resolutions

This report is informational in nature and no resolutions are presented.

Action by House of Delegates: Received for information May 12, 1964.

LIBRARY AND HISTORY COMMITTEE

NEAL SHEFFIELD (1968), *Chairman*

FRANK O. ALFORD (1964)

M. M. LILLEY (1966)

S. H. STEELMAN (1965)

H. ROYSTER CHAMBLEE (1967)

Meetings: No meeting of the entire committee was held during the year. However, we have been in touch by correspondence.

Assignments: The 1963 House of Delegates adopted the following resolution (Trans. 1963:428):

"Resolved, that the Library and History Committee continue its work on the exhibit of dentistry during the Civil War era, enlarge and refine it, encourage members to contribute to it, and that the exhibit be displayed again at the 1964 Annual Session, and be it further

"Resolved, that the exhibit ultimately be placed permanently in the proper institution where it will be viewed by the largest number of people."

Results of Study: After study of the exhibit "Dentists In Gray," we have endeavored to make additions and refinements in order to again present it at the 1964 meeting of the Society in Pinehurst. Soft background music of tunes most popular in the era will be added.

Resolutions

Resolved, that the Library and History Committee, with the aid of the officers and the Executive Committee, direct its efforts in surveying possible institutions that would be interested in receiving this exhibit for permanent display for viewing by the public, and be it further

Resolved, that this committee, as well as the membership at large, exert every effort to contribute items to the exhibit after it has been placed in the chosen institution.

Action by House of Delegates: Adopted May 12, 1964.

MEMBERSHIP COMMITTEE

DARDEN J. EURE, *Chairman*

J. W. GIRARD, JR.
H. P. REEVES, JR.

T. E. SIKES, JR.
WILLIAM H. OLIVER

JAMES H. LEE

Membership in 1963: As of December 1963, we had a total of 1,211 fully privileged members in good standing. The breakdown furnished by the Central Office follows:

December 31, 1963

District	Active	State Life	Total	*ADA Life	**Re-tired	Dropped from the roll
1	225	23	248	21	0	1
2	267	41	308	39	2	2
3	245	32	277	24	2	3
4	167	30	197	26	1	1
5	146	35	181	28	0	0
	1,050	161	1,211	134	5	7

* Included in Total Column

** NOT included in Total Column

Delegates to ADA: North Carolina has been allocated 6 delegates for the 1964 Annual Session, according to official word from the American Dental Association. Our representation remains the same.

Membership in 1964: As of March 31, 1964, we had a total membership of 1,238. The breakdown furnished by the Central Office follows:

District	Active	State Life	Total	*ADA Life	**Re-tired	*Delinquent
1	232	22	254	20	1	4
2	273	43	316	42	2	6
3	253	29	282	26	2	1
4	173	29	202	27	1	4
5	148	36	184	32	0	3
	<hr/> 1,079	<hr/> 159	<hr/> 1,238	<hr/> 147	<hr/> 6	<hr/> 18

* Included in Total Column

** NOT included in Total Column

Gain in Membership: In the past decade membership in the N. C. Dental Society has increased almost 30 per cent. As of December 1954 there were 937 members, according to ADA figures. You will note from the above report that on December 31, 1963 we had a total membership of 1,211.

Membership Recruitment: At the District Officers' Conference in December, the Membership Chairman stressed the necessity for an all out recruitment program on the part of the individual members. Every one has an equal responsibility in this phase of our Society.

Resolutions

Resolved, that it be made a matter of record that the following did not pay their 1963 dues by December 31, 1963, and, according to Article VI, Section 6, of the Bylaws, have been dropped from the roll:

First District—

Dr. W. McD. Johnson, Banner Elk

Second District—

Dr. B. C. Schamp, Orlando, Florida

Dr. J. H. Stancil, Kannapolis

Third District—

Dr. John N. Hester, Reidsville

Dr. Ruta B. Paulson, Raleigh

Dr. F. H. Underwood, Carthage

Fourth District—

Dr. Herbert Smith, Raleigh

Action by House of Delegates: Adopted May 12, 1964.

MILITARY AND VETERANS' AFFAIRS COMMITTEE

J. HARRY SPILLMAN (1967) *Chairman*

COYTE R. MINGES (1964)

H. E. PLASTER (1966)

GUY R. WILLIS (1965)

T. EDWIN PERRY (1968)

Meetings: No meetings were held.

Assignments: The 1963 House of Delegates adopted the following resolution (Trans. 1963):

"Resolved, that all local Societies establish a Civil Defense Committee, and through cooperation with local medical societies, Civil Defense officials, and Red Cross officials, secure training necessary to comply with directives of the ADA in the report to the 1960 House of Delegates." (Trans. 1960:216).

Action Taken: None. Action required only at local level.

Resolutions

This report is informational in nature and no resolutions are presented.
Action by House of Delegates: Received for information May 12, 1964.

NORTH CAROLINA HEALTH COUNCIL AD HOC COMMITTEE ON OCCUPATIONAL HEALTH PROGRAM FOR STATE EMPLOYEES

CLIFTON E. CRANDELL, D.D.S.

Member, Governor's Council on Occupational Health
Chairman, Dental Subcommittee

Background: Interest in this project started about six years ago. It really started moving in 1962, when the N. C. Governor's Occupational Health Council appointed a committee to work with the N. C. Health Council, and the Medical Society of the State of North Carolina Occupational Health Committee set up a subcommittee on the project.

These people recommended that a special ad hoc committee be appointed by the president of the N. C. Health Council. This was done in December 1962. The following were appointed:

Earl F. Bradford, General Electric Transformer Plant, Newton; John Truesdail, Olin-Mathieson Corporation, Pisgah Forest; George Dowdy, Vice President, Belk's, Inc., Charlotte; Dr. B. W. Goodman, President-Elect, Carolina Industrial Medical Association, 12 Second Avenue, N.E., Hickory; Mrs. L. B. Bryant, 3534 Park Road, Charlotte; Clifton Beckwith, Executive Secretary, N. C. State Employees Association, 115 Hillsboro Street, Raleigh; and Dr. Clifton E. Crandell, UNC School of Dentistry, Chapel Hill.

Dr. Crandell's responsibility was delineated in meetings of the Ad Hoc Committee, to wit: to develop information as to the feasibility, scope, and nature of the dental services that might be involved in this program.

Dr. Crandell collected appropriate data and asked assistance from the North Carolina Dental Society and the Old North State Dental Society to formulate a proposed program. In a meeting in Chapel Hill on August 5, 1963, such a program was planned. Those present were:

Drs. S. B. Towler, President, North Carolina Dental Society; Willie T. Wilkins, Old North State Dental Society; R. L. Lindahl, Chairman, Dental Service Corporation Committee, North Carolina Dental Society; J. S. D. Nelson, North Carolina Dental Society; Frank Law, UNC School of Public Health; and C. E. Crandell, Ad Hoc Committee.

Dr. Joseph E. Campbell, representing the Old North State Dental Society, had a conflicting meeting (National Dental Association) and could not attend.

A summary of information relative to the purpose, scope, and feasibility of the project follows:

Purposes: The purposes of such a program should be to:

1. Encourage and stimulate personal dental health.
2. Provide sound dental health education and counseling.
3. Assure adequate dental care to the state employee who is occupationally injured or ill on-the-job.
4. Provide work environments which will be free of dental health hazards.

5. Insure that applicants for state employment have adequate dental health to efficiently perform their anticipated duties.

6. Keep records adequate for patient care and occupational health research.

Nature: A minimal program should encompass the following:

1. Pre-employment dental examinations should be required.
2. Employees working in areas or jobs known to be hazardous to dental health should be examined periodically.
3. Dental examination should be required after return from sick leave if a dental illness was the sickness involved.
4. Standard procedures should be set up for the employee who is dentally ill or injured to receive adequate care promptly so that work-loss time is kept at a minimum.
5. Dental health education measures should be used as effectively as possible.

Such a program is advocated by the American Dental Association and the American Association of Industrial Dentists.

Data Collected: Pertinent studies reported in the dental literature state that time lost averages 4.5 days per year per employee because of dental ailments, or about two per cent of work time.

Facts about State employees:

1. Sick leave allowed is 10 days per year, with no limit to amount accrued. Employee receives regular pay for sick-absent time. Annual leave allowed is 15 days per year, limit 30 days, regular pay. Sick leave usually taken first, then annual leave, then Workmen's Compensation (provides 60 per cent of weekly salary, up to \$35). Disability pay eligibility starts after 10 years employment.

2. Number of employees: total of 74,343 (includes some 40,000 public school teachers), concentrated into a few counties: Wake, 10,288; Orange, 4,149; Guilford, 3,530; Mecklenburg, 2,624; Granville, 1,740; Pitt, 1,609; Burke, 1,608; Cumberland, 1,521. Tyrrell County has the fewest number of State employees with 56.

3. The State is the third largest user of Workmen's Compensation.

Recommendations: Study by the committee revealed that:

1. Existing state dental facilities at prisons, mental hospitals, sanitariums, health centers, and educational institutions have missions so grossly different from the program contemplated herein that their use appears to be very impractical.

2. The widely scattered population of state employees would preclude the possibility of setting up new state facilities for the contemplated program.

3. The dental practitioners of the State are willing and competent to render such dental service as an Occupational Health Program for state employees may require.

4. There is under development a dental service corporation, a non-profit organization which could offer adequate dental service at the lowest cost, and with the greatest geographic coverage, and with dentally-oriented quality controls, and could in addition, offer dental services to state employees' dependents, which has been a positive selling point in other areas of the country.

In view of the above, the committee recommended that a program of full dental care for state employees and their dependents be developed by the North Carolina Health Council, and legal establishment thereof sought by the Council in the 1965 Session of the North Carolina Legislature, such program to be negotiated with the dental service corporation, and jointly financed by the state and payroll deductions, the State assuming financial responsibility for occupational on-the-job dental illness, and the state employee assuming financial responsibility for all other dental services.

Resolutions

Resolved, that the President of the North Carolina Dental Society be authorized to appoint a special committee to work in liaison with the North Carolina Health Council and the Governor's Council on Occupational Health, to study any proposals for a dental care program for state employees and to report to the House of Delegates.

Action by House of Delegates: Adopted May 12, 1964.

NURSING HOME ADVISORY COUNCIL TO NORTH CAROLINA STATE BOARD OF HEALTH

JERE E. ROE, D.D.S., *Dental Member*

As the dental member of the Advisory Council, I met with this Council in April, July, and November of 1963, and in January and February of 1964.

The State Board of Health has just this year issued a new set of rules and regulations for nursing homes for the state, and for the first time some dental sections have been included. These were submitted by our committee and were approved. They are as follows:

"SECTION III—PATIENT CARE

g. When a patient is admitted to a nursing home, a dental examination shall be performed and shall contain the following information:

(1) Type of diet which the patient can best manage (Normal or soft).
(2) The presence of infection of gums, teeth or jaws.

(3) Brief descriptions of any removable dental appliances, and a statement as to whether they are satisfactory.

(4) Indications for dental treatment at the time of admission.

h. There shall be maintained names of dentists who are able to render emergency and other necessary dental treatments.

i. Oral hygiene shall be encouraged for all patients. Recommendations include that:

(1) Daily dental care be given to each patient as necessary for his general health.

(2) Each patient possess one or more toothbrushes in good condition, suitable for cleaning natural and/or artificial teeth. The patient should be encouraged in the use of the toothbrush after each meal, with both natural teeth and/or artificial appliances being thoroughly cleaned.

(3) Each patient, having an artificial (removable) denture, is furnished a receptacle in which to immerse the denture overnight in water or denture cleaning solution.

"D. Drugs

All medicines, poisons and other drugs except domestic remedies shall be obtained only on the prescription of a physician or dentist.

"E. Medical Records

Dental examination shall be filed with the patient's records."

Resolutions

This report is informational in nature and no resolutions are submitted.

Action by House of Delegates: Received for information May 12, 1964.

COMMITTEE ON PRESIDENT'S ADDRESS

S. L. BOBBITT, *Chairman*

DARDEN J. EURE

C. C. DIERCKS

Your Committee wishes first to compliment the President on his very able address, and to congratulate him on the many achievements of his administration.

Action by House of Delegates: Approved May 12, 1964.

PROSTHETIC DENTAL SERVICE COMMITTEE

C. P. OSBORNE, JR. (1968), *Chairman*

C. Z. CANDLER, JR. (1964)

THOMAS L. DIXON (1966)

C. D. EATMAN (1965)

JAMES A. HARRELL (1967)

For those members in the House of Delegates who are newly initiated to the rigors of this august body we submit a comprehensive report for your examination and information. This can in no way reveal the past as it has occurred, nor foretell the future effect these things that have transpired will have on the practice of each North Carolina dentist.

During this year our activities have been to meet in Durham with the authorities at the School for Dental Technicians approximately every two months. Among the accomplishments was the employment of a second instructor, who is qualified in dental ceramics, crown and bridge, and partial denture prosthesis. We also met with the certification board from the American Dental Association to be examined, and later approved, by this group.

We feel that the dental technician should be made a more respected member of the dental team and have encouraged North Carolina dentists to invite them to local, district, and state meetings. Surely this should reduce the strain sometimes felt in certain localities of our state. With this in mind, members of the Prosthetic Dental Service Committee made themselves available at the five district meetings last fall in order to answer questions and clarify the future progress of their activities.

Much of the labor involved has yet to be done and we respectfully submit four resolutions at the end of this report.

Resolutions

1. Resolved, that the Prosthetic Dental Service Committee be encouraged to work with the North Carolina Dental Laboratory Association for better understanding of common problems.

2. Resolved, that the North Carolina Dental Society favor the adoption of the recommendations for the accreditation of Dental Laboratories by the Joint Committee for Accreditation.

3. Resolved, that North Carolina dentists give support to their local laboratories in an effort to promote acceptance of procedures for accreditation.

4. Resolved, that the officers and executive committee of the North Carolina Dental Society be commended for the splendid cooperation given this program during the past years.

Action by House of Delegates: Resolutions 1, 3, and 4 adopted May 12, 1964. Resolution 2 withdrawn May 13, 1964.

COMMITTEE ON REIMBURSEMENT OF OFFICERS AND DELEGATES

PEARCE ROBERTS, JR., *Chairman*

DARDEN J. EURE

S. BYRON TOWLER

Purpose: This committee was appointed by the chairman of the Executive Committee to study the feasibility of defraying travel and out-of-pocket expenses of elected and appointed officers, delegates to ADA, and duly appointed representatives of the Society at conferences.

The Study: A letter of inquiry was sent to 32 states. To date, replies have been received from 29, 2 states, California and Mississippi not responding.

The replies are very informative relating to the question. A breakdown for appraisal shows:

1. ADA Delegates:

- 5 States pay first class travel and \$30 per diem. Southern California, Massachusetts, Michigan, New York, Oregon
- 7 States pay first class travel and \$25 per diem. Minnesota, New Jersey, Ohio, Oklahoma, Tennessee, Texas, Washington
- 1 State pays first class travel plus \$40 per diem. Montana
- 1 State pays first class travel plus \$20 per diem. Georgia
- 3 States pay first class travel and \$15 per diem. Kentucky, Rhode Island, Nebraska
- 2 States pay first class travel plus \$10 per diem. South Carolina, West Virginia
- 1 State pays a \$250 maximum. Alabama
- 4 States pay first class travel only. Arkansas, Florida, Missouri, New Mexico
- 1 State pays \$125 if all meetings are attended. Illinois
- 1 State pays \$100. Indiana
- 1 State pays \$75 per diem only. Louisiana
- 1 State pays \$50 for each meeting attended. Wisconsin
- 1 State does not reimburse, but aids in other ways. Pennsylvania
- 1 State does not reimburse for any expenditure or travel. Virginia
- 2. Seven states control expenditures of this nature in their Constitution and Bylaws. The other states generally control expenditures by actions of the Budget, Executive Committees, or governing board.
- 3. Appointed representatives of the Society to out-of-state conferences are generally reimbursed for out-of-pocket expense and first-class travel.

Comments: Many states allow their officers a limited expense account, an honorarium or some other form of partial repayment for out-of-pocket expense.

Recommendations: That the above report and all related material that has been compiled be filed in the Central Office as a permanent record. Furthermore, that the Executive Committee accept this report as information to be submitted to the House of Delegates at the 1964 annual meeting for consideration and continued study by a specially appointed committee.

Action by Executive Committee: The above report was submitted to the Executive Committee and approved January 11, 1964.

Resolutions

1. **Resolved**, that a continued study be made of the feasibility of defraying travel and out-of-pocket expenses of elected and appointed officers, delegates to the ADA, and duly appointed representatives of the Society at conferences, by a specially appointed committee, and a report submitted to the House of Delegates in 1965.

2. **Resolved**, that the Executive Committee for a period of one year, beginning June 1, 1964 and extending to the next Annual Session of this body, be authorized to approve an expense allowance consisting of first class transportation and \$25.00 per diem for each day of official participation to an elected or selected delegate or representative for any duly authorized convention, conference, workshop, or meeting beyond the limits of North Carolina, deemed to be of benefit to the membership of the North Carolina Dental Society.

3. **Resolved**, that the Executive Committee be authorized to approve a special fund of \$500.00 for the President of the North Carolina Dental Society to help defray some of his "out-of-pocket" expenses during his term of office.

4. **Resolved**, that it be made a matter of record that the House of Delegates commends and thanks the men who have served as officers,

delegates and representatives to conferences in the past at their own expense.

Action by House of Delegates: Resolutions 1, 2, 3, and 4 adopted May 12, 1964.

RELIEF COMMITTEE

J. T. LASLEY (1968), *Chairman*

J. W. HEINZ (1964)

W. E. CLARK (1966)

S. L. BOBBITT (1965)

J. M. KILPATRICK (1967)

Continuing Report: This report is from March 1, 1963 to March 1, 1964, in order to make it a continuing report. It may not correspond in every detail to the fiscal year of the North Carolina Dental Society, which ends on May 31.

Number Receiving Aid and Disbursements: On March 1, 1963 there were three members of the Society receiving aid from the North Carolina Dental Society and the ADA Relief Funds, and the widow of a deceased member. The three members are from the First, Second, and Fifth Districts, and the widow is from the First District. The relief grants are made on a fifty-fifty basis by the NCDS and ADA.

On April 16, 1963, the member from the Second District died at the age of seventy-four. From April to January there were three receiving aid. In January, 1964 the ADA approved the application of the widow of the deceased member from the Second District, after it had been approved by the N. C. Relief Committee, and signed by the Secretary.

If there is no further change in those receiving aid before the end of the fiscal year, May 31, we will have paid out a total of \$2,940.00, and an equal amount will have been paid by the ADA.

Income: The members of the N. C. Dental Society contributed \$2,-024.00 to the Annual Relief Seals Fund Campaign. The N. C. Dental Relief Fund received two checks from the ADA Relief Fund, one-half of the total amount paid — \$1,012.60, and a bonus check for one-quarter the amount paid — \$506.00. We qualified for this bonus because we raised our quota, and paid out in grants more than we received from the ADA. This bonus allowance is good for one more year. The total received from the Seals Campaign was \$1,518.00.

The N. C. Dental Auxiliary presented a check for \$1,987.50, the proceeds from their scrap amalgam drive. This brings the total received from the Auxiliary, since they inaugurated the drive in the fiscal year 1953-1954, to \$17,843.66.

The total received from the Seals Campaign and from the Auxiliary was \$3,505.50.

The North Carolina Dental Society is indeed grateful to the Auxiliary for their contributions to the cause of dental relief. It has meant the difference between solvency and build-up to our fund, and a yearly deficit.

The Relief Committee holds its annual meeting during our state meeting. Minutes are kept by the committee.

Resolutions

This report is informational in nature and no resolutions are presented.

Action by House of Delegates: Received for information May 12, 1964.

COMMITTEE ON RULES AND ORDER

T. G. COLLINS, *Chairman*

E. D. BAKER

L. D. HERRING

Speaker of the House: Article III, Section 6 of the Bylaws provides that: "The Speaker of the House shall preside at all meetings of the

House of Delegates and shall determine the order of business for all meetings subject to the approval of the House of Delegates and shall perform such other duties as custom and parliamentary usage require. The decision of the Speaker shall be final unless an appeal from decision shall be made by a member of the House in which case final decision shall be by majority vote."

The above provision is interpreted by this Committee to include authority of the Speaker to appoint a parliamentarian and such committees of the House as he deems necessary to expedite business. Further, the committee recommends that the Speaker be granted a vote only in case of a tie.

Adoption of Agenda: The Committee submits an agenda for the 1964 session of the House of Delegates and recommends its approval as the official order of business.

Voting Procedures: The method of voting in the House will usually be indicated by the Speaker in the call for the vote: voice vote, hand vote, or rising vote. When a rising vote is called for, delegates are asked to remain standing until the count has been completed and the Speaker indicates that the voters may be seated.

A *90 per cent vote* shall be interpreted as requiring 90 per cent of all legal votes cast.

A *two-thirds vote* shall be interpreted as requiring two-thirds of all legal votes cast.

Recognition of Those Wanting to Speak: When a member wishes to address the House, he should secure the attention of the Speaker and not begin to speak until he has been recognized by the Chair. He should then state his name and his district for the benefit of the recorder.

Access to the Floor: Access to the floor of the House will be permitted only to Delegates, Officers, and Staff. Alternate Delegates and members of the Society will be seated in a special section in the rear of the House.

Attendance of Representatives of the Press: Members of the House will wish to be guided in their deliberations and debate by the knowledge that representatives of the press may be in the visitors gallery.

Introduction of New Business at Last Meeting: No new business, except the Report of the Clinic Board of Censors, shall be introduced into the House of Delegates at the final meeting on Wednesday, unless by unanimous consent. Approval of such business shall require unanimous vote.

Privilege of the Floor: Article III, Section 6 of the Bylaws provides that: "Chairmen and members of committees who are not members of the House of Delegates shall have the right to participate in the debate on their respective reports, but shall not have the right to vote."

At the discretion of the Speaker, with the approval of the House, privilege of the floor may be granted to any member of the Society and Staff.

Minority Report: Attention is called to Article III, Section 2 of the Bylaws which states: "Ten members of the House of Delegates may file a minority report dissenting from the action of the House of Delegates and appeal to the General Session of the Society."

Reference Committees: All reports and resolutions of committees, except amendments or alterations to the Constitution and Bylaws, matters of ethics, and recommendations of the President, may be referred to reference committees appointed by the Speaker.

The standing committee on Constitution and Bylaws will constitute the

reference committee on amendments and alterations to the Constitution and Bylaws.

The standing committee on Ethics will constitute the reference committee on all matters pertaining to ethics.

The special committee on the President's Address will constitute the reference committee on recommendations of the President.

Roll Call: The roll will be called by the Secretary-Treasurer at the beginning of each meeting. For the record, those answering the roll at that time will constitute the Delegates in attendance for that meeting. No substitutions for Delegates will be made after the roll call, except by request of the floor chairman of the delegation concerned.

Floor Chairmen: District delegations shall elect a floor chairman (unless he is designated by the District Bylaws) and report their names to the Secretary prior to the second meeting of the House. The Floor Chairman will designate the delegates to comprise the delegation from his district for each meeting of the House of Delegates.

Seating of Delegates: Delegates are requested to seat themselves according to the floor plan of the House. This will enable the Speaker to recognize and identify any delegate who wants to speak.

Disposition of Reports: All reports will be referred to a reference committee by the Speaker of the House. The reference committee, after evaluating a report, must advise the House to adopt, amend, postpone, or reject all resolutions presented in the report. If no resolutions are presented in the report, the reference committee will present the report to the House of Delegates with appropriate comments and a motion that the report be filed for information and printed in the Transactions. A reference committee may not "pigeon hole" any item, but must refer it to the House of Delegates for final action.

Resolutions

1. **Resolved**, that the attached agenda be adopted as the official order of business for this session of the House of Delegates.

2. **Resolved**, that the list of referrals submitted by the Speaker of the House of Delegates be approved.

3. **Resolved**, that the report of the Committee on Rules and Order be adopted, and be it further

Resolved, that the report of the Committee on Rules and Order constitute the rules for the proper conduct of business at this session of the House of Delegates.

Action by House of Delegates: Resolutions 1, 2, and 3 adopted May 10, 1964.

ORDER OF BUSINESS

North Carolina Dental Society House of Delegates 1964

Sunday, May 10—2:00 p.m.

1. Call to order by Speaker of the House, Ralph D. Coffey
2. Invocation—H. Royster Chamblee
3. Roll Call—declaration of a quorum
4. Report of Committee on Rules and Order
5. Announcement of appointment of Reference Committees
6. Approval of referrals to Reference Committees
7. Report of Chairman, North Carolina Delegation to A.D.A.
8. Report of Trustee, Fifth District, A.D.A.

9. Report of Legal Counsel
10. Report of Constitution and Bylaws Committee
11. Unfinished Business
12. New Business
13. Announcements
14. Adjournment

Tuesday, May 12—9:00 a.m.

1. Call to order by Speaker of the House, Ralph D. Coffey
2. Invocation—Walter T. McFall
3. Roll Call—declaration of a quorum
4. Reports of Reference Committees
5. Unfinished Business
6. New Business
7. Adjournment

Wednesday, May 13—10:00 a.m.

1. Call to order by Speaker of the House, Ralph D. Coffey
2. Invocation—Freeman C. Slaughter
3. Roll Call—declaration of a quorum
4. Reports of Reference Committees
5. Report of Clinic Board of Censors
6. Unfinished Business
7. Adjournment

**COMMITTEES OF THE HOUSE OF DELEGATES
1964**

1. STANDING COMMITTEES

Constitution and Bylaws: Z. L. Edwards, Chairman; G. Shuford Abernethy, D. T. Carr, T. G. Nisbet, Walter H. Finch, Jr.
Ethics: Thomas M. Hunter, Chairman; A. C. Current, Jr., W. Stewart Peery, Norman F. Ross, Horace K. Thompson.

2. REFERENCE COMMITTEES

Committee A: M. M. Forbes, Chairman; Worth M. Byrd, J. B. Freedland, Maurice B. Richardson, G. Curtis Wilson.
Committee B: John S. Dilday, Chairman; Robert A. George, R. H. Gilbert, John W. Girard, Jr., Nash H. Underwood.
Committee C: J. Henry Ligon, Jr., Chairman; James A. Bingham, Jr., M. W. Carpenter, W. T. Ralph, Baxter B. Sapp, Jr.
Committee D: M. W. Aldridge, Chairman; C. W. Horton, William H. Oliver, Paul A. Stroup, C. B. Taylor.

3. COMMITTEE ON RULES AND ORDER

T. G. Collins, Chairman; E. D. Baker, L. D. Herring.

4. COMMITTEE ON PRESIDENT'S ADDRESS

S. L. Bobbitt, Chairman; E. D. Baker, Darden J. Eure.

**HOUSE OF DELEGATES
1964
SUMMARY OF REFERRALS**

Hearings: Standing and reference committees will conduct open hearings on all reports referred to them by the Speaker with the approval of the House. Any member may participate in the discussion at these open hearings.

Referrals: Reports of officers and committees have been referred to the committees indicated below:

Annual Session.....	Reference	Committee A
Blue Shield-Blue Cross Advisory.....	Reference	Committee B
Cancer.....	Reference	Committee C
Children's Dental Health.....	Reference	Committee D
Constitution and Bylaws.....	Constitution and Bylaws	Committee
Corporate Practice.....	Reference	Committee A
Dental Care for the Aged.....	Reference	Committee B
Dental Health and Information.....	Reference	Committee C
Dental Hygienists Study.....	Reference	Committee D
Dental Service Corporation.....	Reference	Committee C
Ethics.....	Ethics	Committee
Executive Secretary.....	Reference	Committee C
Industrial Commission.....	Reference	Committee B
Insurance.....	Reference	Committee C
Legislative.....	Reference	Committee D
Library and History.....	Reference	Committee A
Membership.....	Reference	Committee B
Military and Veteran's Affairs.....	Reference	Committee C
N. C. Delegation to ADA.....	House of Delegates	
N. C. Health Council.....	Reference	Committee D
N. C. State Board of Dental Examiners.....	Reference	Committee D
Nursing Home Advisory Council to N. C. State Board of Health.....	Reference	Committee A
President's Address.....	Committee on President's Address	
Prosthetic Dental Service.....	Reference	Committee D
Reimbursement of Officers and Delegates.....	Reference	Committee A
Relief.....	Reference	Committee B
Rules and Order.....	House of Delegates	
School Health Co-ordinating Service.....	Reference	Committee C
Secretary-Treasurer.....	House of Delegates	
State Institutions.....	Reference	Committee D
Study Club.....	Reference	Committee A
Trustee Districts of ADA.....	House of Delegates	
UNC, Dental Advisory to.....	Reference	Committee B

SCHOOL HEALTH CO-ORDINATING SERVICE COMMITTEE

THOMAS B. REID, JR., *Chairman*

GEORGE S. ALEXANDER
C. Z. CANDLER, JR.

T. EDGAR SIKES, JR.
THOMAS G. COLLINS

Meetings: During the past year this committee has had several conferences with representatives of the Division of Oral Hygiene and the Child Health Section of the State Health Department, and the Department of Public Instruction. All of these agencies, either officially or unofficially, are associated with the School Health Fund.

Liaison With Medical Society: We have studied at some length, in liaison with appropriate committees of the North Carolina Medical Society, the program of the School Health Fund.

At a meeting of a subcommittee of each society on March 1, 1964, it was decided that the two societies should work together in obtaining a full review and revision of the School Health Program, and an appropriate resolution was approved. Subsequently, this resolution was approved by the School Health Co-ordinating Service Committee and is submitted at the end of this report for action by the House of Delegates. The same resolution is being submitted to the House of Delegates of the Medical Society this spring.

Resolutions

Resolved, that the North Carolina Dental Society and the Medical Society of the State of North Carolina request the Governor to appoint an Advisory Council on the Administration of the School Health Program

to advise on policy, rules, regulations, and such other matters as may be referred to it by the State Board of Education and the State Board of Health, and be it further

Resolved, that the composition of said Council should be: three dentists, three physicians, two active local school administrators, one pharmacist, and three representatives of the community at large. The administrative head of the program for the State Board of Education should serve as secretary of the Council. The State Health Officer and the Commissioner of Public Welfare, should be represented either in person or by designated assistants as ex officio members of the Council.

Action by House of Delegates: The resolution submitted by the School Health Co-ordinating Service Committee was adopted in principle, May 12, 1964.

STATE INSTITUTIONS COMMITTEE

K. L. JOHNSON (1968), *Chairman*

D. A. JACKSON (1964)

S. H. ISENHOWER (1966)

M. L. CHERRY (1965)

DONALD L. HENSON (1967)

Meetings: This committee has held no meetings. However, each member has been contacted for any information concerning State Institutions in their communities.

Content of Report: The directors of Dorothea Dix, Butner, and Murdoch Hospitals have been contacted. Murdoch is now undergoing modernization. Dorothea Dix and Butner report everything satisfactory. No report on other institutions.

Resolutions

This report is informational in nature and no resolutions are presented.

Action by House of Delegates: Received for information May 12, 1964.

STUDY CLUB COMMITTEE

JAMES H. LEE, *Chairman*

FRED N. OGDEN, II, *Vice Chairman*

JAMES L. COX

WILLIM H. PRICE

J. S. MOORE

HENRY S. ZAYTOUN

Function: The committee has advised and contacted existing study clubs, offering information and assistance. Examples of constitutions and bylaws have been made available for new groups.

Projected Clinics: Vice Chairman Ogden has requested co-operation of clubs in the projected clinic program for the annual meeting.

Resolutions

This report is informational in nature and no resolutions are presented.

Action by House of Delegates: Received for information May 12, 1964.

COMMITTEE ON TRUSTEE DISTRICTS OF A.D.A.

PAUL E. JONES, *Chairman*

CLYDE E. MINGES

Background: The 1963 House of Delegates of the A.D.A. adopted the following resolution:

"Resolved, that a committee of the Association consisting of not more than five delegate members of the House of Delegates, be appointed by the President to study the structure of the present trustee districts and their representation, and be it further

"Resolved, that the special committee be directed to report to the 1964 session of the House of Delegates."

President Hollers appointed a special committee as directed, with Dr. Harry Lyons as Chairman.

Subsequently, the special committee explored and studied the problem of re-districting and developed a preliminary proposal for consideration and comment by constituent societies.

Observations by Special Committee: The following observations by the Special Committee are included for information:

1. Some inequity in the organization of the current 13 trustee districts appears to exist, since one-third of the total membership is represented by three trustees while 29 constituent societies are represented by four trustees.

2. The maintenance of the number of trustee districts at 13 was not to be considered as a critical factor in the recommendations of the Special Committee. The number of trustee districts should not be reduced from 13, but, if desirable, might be increased beyond the present number.

3. Revision of the present trustee districts solely on the basis of the number in each district was felt to be neither desirable nor practical.

4. It is desirable to base a revision of trustee districts, insofar as possible, on the following factors:

- a. Permitting as many as possible of the present trustee districts to remain unchanged, providing they were reasonably consistent with the criteria applied to the other districts;
- b. Placing within a revised trustee district those states and constituent societies which had good historic and geographic relations with each other.

The Proposal: The Special Committee proposes that six of the current districts remain unchanged, seven districts be revised, and two new districts be created.

Committee Appointed: President Towler appointed this committee to study and evaluate the proposed revision of districts and submit a resolution on the proposal to the House of Delegates.

Recommendations: The Committee notes that the proposed revision of districts would give an additional trustee to the Southeastern constituent societies which formerly composed the Fifth Trustee District.

After careful study the committee believes that the proposed revision would give us a stronger voice on the Board of Trustees and strengthen us as an effective political body in the House of Delegates.

Further, the committee notes that the revision would reduce travel required by several trustees, at a saving to the Association.

The committee recommends that the North Carolina Dental Society endorse the proposed revision and an appropriate resolution is submitted.

Resolutions

Resolved, that the North Carolina Dental Society endorse the revision of the Trustee Districts of the American Dental Association as proposed by the Special Committee appointed by the President of the A.D.A., and be it further

Resolved, that Dr. Harry Lyons, Chairman of the Special Committee, be so advised.

Action by House of Delegates: Adopted May 10, 1964.

**DENTAL ADVISORY COMMITTEE
TO THE
UNIVERSITY OF NORTH CAROLINA**

C. C. POINDEXTER, Chairman

GEORGE S. ALEXANDER
S. L. BOBBITT
WADE H. BREELAND
D. T. CARR
S. P. GAY

BROADUS E. JONES, JR.
PAUL E. JONES
W. T. MARTIN
CLYDE E. MINGES
W. T. RALPH

C. W. SANDERS

Meetings: No formal meetings of the committee were held during the past year.

Statement from Dean Brauer: A statement on the general operations and major activities of the School and University has been received from Dean Brauer and is attached for your information.

Resolutions

This report is informational in nature and no resolutions are presented.
Action by House of Delegates: Received for information May 12, 1964.

**Statement from the University of North Carolina
School of Dentistry**

JOHN C. BRAUER, *Dean*

The main area of interest during 1963-64 has been the further development of the Dental Research Center. The terminal architects' plans now are being reviewed by the Research Facilities Branch in Washington, D. C., and following clearance from this agency, the contractors will receive the plans for submission of bids about April 1, 1964. Construction should begin about mid-April, with the completion date late in 1965. With the many contributions and pledges from the dentists of the State, the dental supply houses, laboratories, and manufacturers, and with a major source of funds from the University, this new and historic facility has been made possible.

It is important to state that the Research Center could not have been a reality without the dentists of the State, and it is for the latter reason that the University Administration was most desirous to support this program of research for dentistry. This certainly reflects the greatest single achievement in the history of dentistry in the State of North Carolina.

With the appointment of James Bawden, D.D.S., Ph.D., as the Assistant Dean and Co-ordinator of the Dental Research Center, the organization of this Center is well on its way. This school has also been able to attract several other outstanding young scientists, who will make considerable contributions to the progress of our profession. The House of Delegates of the North Carolina Dental Society during its 1958 session

approved the plans and program for the expansion of the School of Dentistry, and this plan has been translated into architect's drawings. These latter drawings, now with an appropriate proposal, have been submitted for approval for Federal matching moneys at the earliest possible date. Congress having passed HR 12 this past year makes possible substantial matching of funds with State funds to permit new or additional facilities for many schools of dentistry and medicine throughout the country. It is from this latter source that we would expect approximately two-thirds of the total cost of construction for the new educational wing. Accordingly, it probably will be 1967 before the State Legislature will consider the matching of these Federal funds, and, in this instance, it would be the Fall of 1969 before any additional students could be accepted. This means that additional graduates would not be a reality until June of 1973.

As this latter program continues to proceed in its final planning, this School and the University will call for major assistance from the Advisory Committee, as well as from the North Carolina Dental Society.

FEBRUARY 14, 1964

Resolutions

SUBMITTED TO THE
1964 HOUSE OF DELEGATES

The following resolution was submitted by C. T. Barker, Fifth District:

Resolved, that the Legislative Committee be instructed to request a change in the General Statutes of North Carolina to allow dental assistants to make dental radiographs under the direct supervision of a licensed dentist.

Action by House of Delegates: Adopted May 12, 1964.

The following resolution was submitted by M. W. Aldridge, Fifth District:

Resolved, that the House of Delegates pay special recognition and commendation to Dr. J. Homer Guion of Charlotte for his untiring efforts in serving as Secretary of the North Carolina State Board of Dental Examiners for the past nine years. He has not only given of his time and talent for the betterment of the profession in the State, but has always devotedly protected the public's interest in the performance of the duties of his office.

Action by House of Delegates: Adopted May 13, 1964.

Report of Delegation To A.D.A.

FRANK O. ALFORD (1964), *Chairman*

RALPH D. COFFEY (1965)

Z. L. EDWARDS (1966)

PAUL E. JONES (1966)

ERBIE M. MEDLIN (1964)

C. C. POINDEXTER (1965)

In accordance with Article V, Section 3 of the Constitution, a report of the delegates to the 104th Annual Session at Atlantic City, New Jersey, October 14-17, 1963 is herewith submitted.

Change in Personnel of Delegation: Dr. Ralph D. Coffey had to return home on Wednesday because of illness in his family. Dr. S. B. Towler, an alternate delegate, was seated as a delegate by the chairman at the Wednesday and Thursday sessions of the House of Delegates to replace Dr. Coffey.

Meetings: There were three sessions of the House of Delegates and two Fifth District Caucuses. North Carolina was fully represented at all these meetings.

Mr. Andrew M. Cunningham was seated with the delegation at all sessions of the House of Delegates and attended both caucuses of the Fifth District.

Actions by the House of Delegates: A summary of actions by the A.D.A. House of Delegates on 68 resolutions has been prepared for the information of this House of Delegates.

Fifth District Organization: A Manual of Procedure was adopted by the Fifth District in caucus, on October 16, 1963. The purpose of the manual is to provide for a more systematic organization of the delegates in the Fifth District, that it might be a more effective political body in the House of Delegates. Dr. Ralph Coffey served on the committee which drafted the Manual. A copy of the Manual is attached for your information.

Election of Officers: The following officers were elected and installed for 1963-64:

President: Dr. James P. Hollers, San Antonio, Texas

President-Elect: Dr. Fritz A. Pierson, Lincoln, Nebraska

First Vice President: Dr. Louis A. Saporito, Newark, New Jersey

Second Vice President: Dr. Edward F. Mimmack, Buffalo, New York

Third Vice President: Admiral Frank M. Kyes, D. C., U.S.N.

Speaker of the House: Dr. F. Darl Ostrander, Ann Arbor, Michigan.

Resolutions

Resolved, that the North Carolina Dental Society endorse the Manual of Procedure adopted by the Fifth Trustee District of the American Dental Association, October 16, 1963.

Action by House of Delegates: Adopted May 10, 1964.

*FIFTH TRUSTEE DISTRICT ORGANIZATION MANUAL OF PROCEDURE

1. Organization: The members of the Fifth Trustee District Organization shall consist of those dentists listed by the American Dental Association as having been certified as delegates by the following states: Alabama, Florida, Georgia, Mississippi, North Carolina, South Carolina, and Virginia. Alternate delegates, State Officers, and officers and Council Members of the ADA from the Fifth Trustee District of the aforementioned states shall serve as ex officio members without vote, and shall have all the privileges of the floor at any caucus of the Fifth Trustee District Organization. Any change in the certification of a delegate must be communicated to the Chairman.

2. Object: The objects of this organization are as follows:

- a) To organize the seven states and to disseminate information concerning the business affairs that will be considered by the House of Delegates of the American Dental Association in such a manner that all delegates and alternate delegates shall be completely informed.
- b) To strengthen the position of the Fifth Trustee District in national affairs on all matters pertaining to the dental health and welfare of our people.

3. Caucuses: There shall be a minimum of two caucuses each year to be held at the American Dental Association Annual Session site. The first is to be held prior to the opening meeting of the House of Delegates. The second is to be held following the completion of the reference committee reports and prior to the next meeting of the House of Delegates. Such additional caucuses as deemed necessary may be called by the Trustee or by any five (5) members provided the officers have been informed.

4. Interim Meetings: An interim meeting may be called by the Trustee or by any five (5) members provided the officers have been informed and notice of the meeting is mailed thirty days prior to said meeting. No official business will be transacted at an interim meeting unless a quorum is established as is provided in section 5 of this manual. An alternate delegate may be certified by the Chairman of the delegation of the Constituent Society to act as a substitute for the official delegate.

5. Quorum: Two-thirds of the voting members of the Fifth Trustee District Organization shall constitute a quorum for the transaction of business at any meeting.

6. Officers: The officers of the Fifth Trustee District Organization shall be the Trustee, the Chairman, the Vice Chairman, and the Secretary-Treasurer. In the absence of the Chairman, the office shall be filled by the Vice Chairman. In the absence of both Chairman and Vice Chairman, the organization shall elect a Chairman pro-tem. In the absence of the Secretary-Treasurer, the Chairman shall appoint a Secretary-Treasurer pro-tem.

7. Duties of Officers:

a) Trustee:

1. It shall be the duty of the Trustee to represent member states of the Fifth District on the Board of Trustees of the American Dental Association.
2. He shall call all caucus meetings to order.
3. He shall make a written resume of all business transacted at each special and regular meeting of the Board of Trustees

* Adopted by the constituent delegations of the Fifth Trustee District of the American Dental Association meeting in caucus in Atlantic City, New Jersey, October 16, 1963.

except relating to the business transacted at the Annual Session of the Association in which case, an oral report will suffice. These reports shall be sent to the Chairman of the Fifth Trustee District Organization with copies to the Secretary of each State Constituent Society in the Fifth Trustee District or to the person designated by each Constituent Society.

4. He may establish a liaison committee composed of one representative designated by each state to serve him in an informational and advisory capacity only.

b) Chairman:

1. It shall be the duty of the Chairman to administer the affairs of the organization.
2. He, in consultation with the Trustee shall provide for the formulation, printing and distribution of a complete agenda for the caucuses to be held at the Annual Session of the American Dental Association to all delegates and alternate delegates of the Fifth Trustee District. Such agenda shall be in conformity with the agenda which follows this Manual of Procedure.
3. He shall call all meetings to order in the absence of the Trustee.
4. Upon completion of preliminary duties of the Trustee as specified in Section 7 (a), he shall assume the chair and conduct the meeting of the Fifth Trustee District Organization.
5. He shall transmit copies of all reports from the Trustee and any other important business to each delegate and alternate delegate of this district.
6. He shall appoint a parliamentarian, who shall become well versed in parliamentary procedure as is set forth in the "Sturgis Standard Code of Parliamentary Procedure."

- c) Vice Chairman: It shall be the duty of the Vice Chairman to assume the duties of the Chairman in the event of his absence and to assist him at his request.

d) Secretary-Treasurer:

1. It shall be the duty of the Secretary-Treasurer to aid the Chairman in disseminating all information.
2. He shall record the proceedings of all meetings.
3. He shall serve as custodian of the District Organization records and funds.
4. He shall assist the Chairman at his request.
5. He shall make an annual financial report.

8. Election Procedures:

- a) All nominations for office shall be made from the floor.
- b) All elections shall be conducted by the Chairman who shall provide for tellers.
- c) All voting shall be by secret ballot only.
- d) Election of officers shall be in accordance with the following provisions:
 1. Trustee: The Trustee shall be elected in the manner prescribed in Chapter 6, Section 50 of the Constitution and By-laws of the American Dental Association.
 2. Chairman: The Chairman shall be a certified delegate. He shall be elected annually at the last business meeting of the District Organization at the American Dental Association Annual Session by a majority vote. He may succeed himself, but shall not serve for more than three (3) consecutive years.
 3. Vice Chairman: The Vice Chairman shall be a certified delegate. He shall be elected annually at the last business meeting of the District Organization at the American Dental Association Annual Session by a majority vote. He may succeed

himself, but shall not serve for more than three (3) consecutive years.

4. **Secretary-Treasurer:** The Secretary-Treasurer shall be elected annually at the last business meeting of the District Organization at the American Dental Association Annual Session by a majority vote. He may succeed himself, but shall not serve for more than three (3) consecutive years.

9. **Finances:** All expenses incurred for rental of meeting rooms, Fifth Trustee District Organization room and any other necessary expenses for the operation of the organization shall be defrayed by the assessment of each state delegation in an amount not exceeding \$20.00 per delegate.

10. **Amendments:** This Manual of Procedure may be amended at any meeting of the Fifth Trustee District Organization by a two-thirds ($\frac{2}{3}$) majority vote of the members present and voting, provided that the proposed amendment shall have been presented in writing at a previous meeting. They may be amended also by unanimous consent at any meeting provided that a quorum is present at the time the vote is taken.

North Carolina State Board of Dental Examiners

G. SHUFORD ABERNETHY, D.D.S. (1966)
President
J. HOMER GUION, D.D.S. (1964)
Secretary-Treasurer
R. B. BARDEN, D.D.S. (1964)
S. L. BOBBITT, D.D.S. (1966)
WADE H. BREELAND, D.D.S., (1965)
S. W. SHAFFER, D.D.S. (1965)

FEBRUARY 15, 1964

Honorable Terry Sanford
Governor of North Carolina
Raleigh, North Carolina

Dear Sir:

In accordance with the provision of the Dental Law, I wish to hand you herewith a report of the proceedings of the North Carolina State Board of Dental Examiners for the calendar year 1963.

Five meetings of the Board have been held during the year.

A special meeting of the North Carolina State Board of Dental Examiners was held at 2 o'clock p.m., Wednesday, March 20, 1963, at the Sheraton Hotel, High Point, North Carolina, said meeting having been called to consider charges against Dr. John Morley Underhill, filed by Mr. Charles E. Abernathy, investigator for the North Carolina State Board of Dental Examiners, and to consider any other business coming before the Board.

The investigation of the activities and practices of Dr. John Morley Underhill revealed that Dr. Underhill had committed the following acts which are in violation of Article 2 of Chapter 90 of the General Statutes of North Carolina covering the practice of dentistry in the State of North Carolina, to wit:

1. He had for a period of more than two years and continuing until about the 14th day of January, 1963, a professional connection or association with one Enrique Deliz Sanchez in an effort to avoid and circumvent the provisions of Article 2 of Chapter 90 of the General Statutes of North Carolina;
2. He had for a period of more than two years and continuing until about the 14th day of January, 1963, permitted the use of his name by another, to wit: Enrique Deliz Sanchez, for the illegal practice of dentistry by the said Enrique Deliz Sanchez;
3. He had for a period of more than two years and continuing until about the 14th day of January, 1963, been guilty of unprofessional conduct in the practice of dentistry in that he entered into an agreement with the said Enrique Deliz Sanchez by which he and the said Sanchez, an unlicensed person, have divided fifty-fifty all fees for dental services performed by him and the said Sanchez.

Dr. G. Shuford Abernethy, President of the Board, presided at the meeting, and the proceedings of said meeting were recorded by Mrs. Nellie B. Lovin, an official court reporter for Guilford County Superior Court and notary public. All members of the Board were present with the exception of Dr. R. B. Barden. Mr. Joseph W. Grier, Jr., attorney for the North Carolina State Board of Dental Examiners, presented evidence as appears of record in support to the charges. The respondent, Dr. John Morley Underhill, was not present. The return of the Sheriff of Guilford County, North Carolina, evidencing service of the charges and of the notice of the meeting upon Dr. Underhill on March 7, 1963, was presented to the Board.

After hearing the testimony of the witnesses, the Board convened in executive session, and after discussion of the evidence, Dr. Wade H. Breeland moved that the charges as filed be sustained except that in respect to each of the three charges the period be restricted to the period from December 6, 1962 to January 14, 1963. The motion was seconded by Dr. S. W. Shaffer, and upon vote was carried unanimously.

Thereupon, on motion of Dr. Wade H. Breeland and seconded by Dr. J. H. Guion, it was resolved and ordered by the unanimous vote of the members of the Board present that license number eight five nine (859) issued to Dr. John Morley Underhill by the North Carolina State Board of Dental Examiners be revoked and any renewal of said license be revoked, and that the said Dr. John Morley Underhill surrender the afore-said license and any renewals thereof to the Secretary of the North Carolina State Board of Dental Examiners, and that he refrain from the practice of dentistry in the State of North Carolina.

It appearing to the Board that Enrique Deliz Sanchez appears to be guilty of the wilful violation of an Injunction and Restraining Order, which the Board secured against him, and which was ordered in a Judgment of the Superior Court of Guilford County, High Point, Division, October 27, 1957, and that it would be appropriate for the Board and for its investigator to take appropriate action to enforce the terms of the Injunction and Restraining Order, and institute such criminal procedures against the said Enrique Deliz Sanchez as may be indicated. Upon motion of Dr. Sam Bobbitt, seconded by Dr. S. W. Shaffer, it was moved and unanimously resolved that Dr. J. H. Guion, as Secretary of the Board, be authorized and directed to institute contempt proceedings in respect to the violation of the Judgment of October 27, 1957, and that Mr. Charles E. Abernathy, Investigator for the Board, be authorized and directed to institute such criminal proceedings in respect to the unlawful practice of dentistry by the said Enrique Deliz Sanchez as have been disclosed to him by his investigation of this matter.

An application for the reinstatement of license of Dr. Adolphus Gill White, original No. 1931, issued in June, 1948, and who has been in the service and also a missionary in Ecuador, was read and approved.

Dr. James E. Butler, of St. Pauls, North Carolina, appeared before the Board relative to having his license reinstated. It was the unanimous opinion of the Board that Dr. Butler would have to work in an institution under supervision until such time as the Board deemed necessary to be assured of his rehabilitation from the use of alcoholic beverage.

There being no further business, the meeting adjourned.

The North Carolina State Board of Dental Examiners met in Pinehurst, North Carolina, at the Carolina Hotel, Tuesday, May 7, 1963, at 9:30 o'clock a.m. All members of the Board were present. Dr. G. Shuford Abernethy, President, presided. The minutes of the last meeting were read and approved.

The Board reviewed the schedule of the examination to be given at Chapel Hill, North Carolina, beginning June 24, 1963, and agreed to proceed according to the schedule of last year.

The Secretary read a letter from Dr. Clifford Sturdevant concerning the progress of Dr. Carol L. Grahrl, Jr., who is taking a course in operative dentistry at the University of North Carolina. Upon motion, duly seconded, the letter was received for information.

A letter was read from Dr. Jack Menius, of the Murdock School at Butner, North Carolina, asking permission to allow post graduate students in pedodontics at the Medical College of Virginia to come to Butner, one at a time, to work in the dental clinic under the supervision of Dr. Menius for a period of two or three weeks to observe and possibly treat some physically and mentally handicapped children. A motion was made that, under Article 2, Section GS 90-29 of the General Statutes of North Carolina, we approve the request for a period of one year; that we allow the graduate students in the Department of Pedodontics, Medical College of Virginia, to work in the dental clinic at the Murdock School, Butner, North Carolina, for such period of time as Dr. Menius and Dr. C. J.

Vinson, Chairman of the Department of Pedodontics, Medical College of Virginia, see fit. The motion was unanimously passed.

A letter was read from Dr. Leonard R. Cashion, Secretary of the High Point Dental Society, thanking the Board for helping solve their laboratory problem with Mr. Sanchez and Dr. Underhill.

A report was received from Mr. Charles Abernathy concerning his investigation of reports from Pembroke, North Carolina, that some infections were being caused from the extraction of teeth. Mr. Abernathy was unable to identify any individuals who had infections that could be traced to extractions.

A letter was read from Dr. W. C. Keith, of Elizabethtown, North Carolina, and from the McCulloch Press, publishers of the *Bladen Journal* in Elizabethtown, along with a report from Mr. Charles Abernathy, concerning an advertisement that appeared in the *Bladen Journal* welcoming Dr. Keith to Elizabethtown. This full page advertisement was signed by the various contractors in the building of the clinic. The letters and report were received as information.

A letter was read from Mrs. W. J. Butler, of St. Pauls, North Carolina, concerning her son, James. The Secretary was instructed to write Mrs. Butler, explaining to her the stipulations under which the Board would allow Dr. James Butler to work. Dr. E. A. Pearson appeared before the Board at our request concerning the employment of Dr. James Butler in the Oral Hygiene Department, State Board of Health. Dr. Butler also appeared before the Board and was again told under what conditions the Board would allow him to practice dentistry in North Carolina.

The Board voted to meet in Charlotte, North Carolina, as the North Carolina State Board of Dental Elections, as soon as feasible after May 20, 1963, the closing date for receiving nominations to be placed on the ballot for election to the North Carolina State Board of Dental Examiners.

A motion was made and passed that the Board meet at the Carolina Inn, Chapel Hill, North Carolina, June 22, 1963, at 5 o'clock p.m. for the regular annual meeting, and to examine the applications for the dental and dental hygiene examinations beginning June 24, 1963, at 9 o'clock a.m. at the School of Dentistry, University of North Carolina, Chapel Hill, North Carolina.

There being no further business, the meeting adjourned.

A special meeting of the North Carolina State Board of Dental Elections was held in the Doctors Building, Charlotte, North Carolina, at 11 o'clock a.m., June 2, 1963, for the purpose of examining nominations made for the two Members of the Board of Dental Examiners, and to take such action as necessary.

In the absence of Dr. R. B. Barden, President of the Board of Dental Elections, Dr. G. Shuford Abernethy called the meeting to order. Dr. Abernethy declared a quorum present. The minutes of the last meeting were read and approved.

Dr. S. W. Shaffer was elected President for the ensuing year, and Dr. J. H. Guion was re-elected Secretary-Treasurer, and Mrs. Ellen S. Garrison was elected Assistant Secretary.

Dr. Guion reported that nominations were received prior to the closing date of May 20, 1963, for Dr. S. L. Bobbitt of Raleigh, North Carolina, and Dr. G. Shuford Abernethy of Hickory, North Carolina, to have their names placed upon the ballot. A motion was made and passed that since there were only two nominations for the two places to be filled, Dr. Bobbitt and Dr. Abernethy be declared elected Members of the North Carolina State Board of Dental Examiners in accordance with the provisions of the Dental Practice Act of North Carolina, for a period of three years beginning August 1, 1963 and ending July 31, 1966.

There being no further business, upon motion the meeting was adjourned.

The North Carolina State Board of Dental Examiners held its eighty-third regular annual meeting at the Dental School, University of North Carolina, Chapel Hill, North Carolina, beginning Monday morning, June 24, 1963, at 9 o'clock for the purpose of examining applicants for licensure and to dispose of any other business coming before the Board.

The Board met in executive session Saturday afternoon, June 22, 1963, at 5 o'clock, to examine the applications for examination and to arrange the schedule for the examination to begin Monday morning. All members of the Board were present, with Dr. G. Shuford Abernethy, President, presiding. The minutes of the last meeting were read and approved.

The Secretary reported on the investigation being made at Goldsboro, North Carolina, and was instructed to proceed in bringing the case to a conclusion as soon as possible.

Eighty-five applications for dental examination and twenty applications for dental hygiene examination were examined and all were found in order. Applicant No. 56, Dr. Anthony V. P. Ferlazzo, of Quantico, Virginia, and Applicant No. 85, Dr. John Ty Grubbs, of Chapel Hill, North Carolina, withdrew prior to the examination and under our regulations will be allowed to take the examination in 1964 if they so desire. Applicant No. 68, Dr. Howard E. Lewis, of Memphis, Tennessee, failed to present himself for the examination. Applicant No. 7, Dr. Harvey A. McCandless, of Butler, Pennsylvania, withdrew from the examination on Wednesday, June 26, 1963. The remaining applicants, having complied with the requirements of the North Carolina State Board of Dental Examiners, were permitted to take the examination given by the Board.

Dr. Clifford Sturdevant gave the invocation at the opening session Monday morning. Dr. John C. Brauer, Dean of the Dental School, welcomed the applicants and extended to them the use of the facilities of the Dental School. Dr. E. A. Pearson, Director, Department of Oral Hygiene, State Board of Health, spoke briefly and stated that he would be glad to talk with anyone who might be interested in seeking a position with the Department of Oral Hygiene.

The written examinations were held in the auditorium of the Memorial Hospital, and the clinical examinations were held in the Dental School of the University of North Carolina. The examinations started at 9 o'clock a.m., Monday, June 24, 1963, and continued until 7:40 o'clock p.m., Thursday, June 27, 1963.

The Board voted to meet at the Velvet Cloak Motor Inn, Hillsboro Street, Raleigh, North Carolina, Saturday, July 13, 1963, at 5 o'clock p.m., for the purpose of canvassing the grades of the applicants who participated in the examination.

There being no further business and the examination having been completed, the Board adjourned at 7:40 o'clock p.m., Thursday, June 27, 1963.

The North Carolina State Board of Dental Examiners met in a special meeting at the Velvet Cloak Motor Inn, Raleigh, North Carolina, July 13 and 14, 1963, for the purpose of canvassing the grades of applicants examined beginning June 24, 1963, at the School of Dentistry, University of North Carolina, Chapel Hill, North Carolina, and to transact any other business coming before the Board. All members of the Board were present with Dr. G. Shuford Abernethy, President, presiding. The minutes of the last meeting were read and certain corrections made.

The Board voted to allow the following per diem:

- 1 day—Special Meeting, Charlotte, N. C., September 16, 1962
- 1 day—Special Meeting, Asheville, N. C., September 30, 1962
- 1 day—Special Meeting, Charlotte, N. C., December 12, 1962
- 1 day—Special Meeting, High Point, N. C., March 20, 1963
- 1 day—Special Meeting, Pinchurst, N. C., May 7, 1963
- 1 day—Special Meeting, Charlotte, N. C., June 2, 1963
- 7 days—Regular Meeting, Chapel Hill, N. C., June 22-28, 1963
- 2 days—Special Meeting, Raleigh, N. C., July 13, 14, 1963
- 15 days—Making up examination and grading papers

30 days per diem total.

The Secretary reported that the investigation of Mr. Morris Gurley, Goldsboro, North Carolina, who was suspected of practicing dentistry without a license, is continuing. The Secretary was instructed to notify the Wayne County Dental Society that we are continuing work on the case. It was decided that if necessary to gather additional information on the activities of Mr. Gurley, the Board would meet in Goldsboro on

Wednesday, July 31, 1963, to hold a hearing and to summon witnesses who might give us information as to whether any illegal practice of dentistry was being done in Wayne County, and the President and the Secretary of the Wayne County Dental Society to be notified to meet with us.

The Secretary read a letter from the Louisiana State Board of Dental Examiners asking us to sign a petition asking the National Board of Dental Examiners to have members of the Board of Examiners administer the National Board examinations, and they be paid a fee of Fifty Dollars (\$50.00) for this service. A motion was made and passed that since North Carolina does not recognize the National Board, that we refrain from signing the petition.

A letter was read from the New York Board of Dental Examiners asking for the requirements of our practical examination.

A letter was read from Dr. Carol L. Grahl asking what procedure to follow in requesting reinstatement of his license. A motion was made and passed that he appear before the Board after receipt of his application for reinstatement.

A letter was read from Mrs. Obrea H. Hill, of Asheboro, North Carolina, stating that her daughter, Betty, who was a patient for one of the candidates taking the Board, had suffered a severe infection following the extractions and was unable to continue her studies at the University in Durham. The Secretary had already answered the letter, giving Mrs. Hill the necessary information that she desired.

The officers elected for the ensuing year were as follows:

President—Dr. Wade H. Breeland

Secretary-Treasurer Dr. J. H. Guion

The results of the tabulation of the grades of the examination given beginning June 24, 1963, at Chapel Hill, North Carolina, revealed the following applicants for dental licensure, having made an average of 80 per cent or more, were issued license to practice dentistry in North Carolina:

Name	Address	License No.
Richard Franklin Murphy, Shelby, N. C.		2890
William Robert Wentz, Durham, N. C.		2891
Jerry Marshall Gunter, Gastonia, N. C.		2892
Donald David Culp, Charlotte, N. C.		2893
Ronald Obrad Teofan, Alexandria, Va.		2894
William Joseph Porter, Charlotte, N. C.		2895
William Henry Hoffler, Jr., Dover, Delaware		2896
Robert Wesley Ringer, St. Joseph, Michigan		2897
Fred J. Smith, Morganton, N. C.		2898
Noah Horace Mann, Jr., Nashville, Tennessee		2899
Frederick John Schnell, High Point, N. C.		2900
Myron Hugh Ennis, Goldsboro, N. C.		2901
Van Burgan Meadows, Winston-Salem, N. C.		2902
Preston Dallas Miller, Jr., Blacksburg, Virginia		2903
John Wesley Mainwaring, Jr., Chapel Hill, N. C.		2904
Charles Edward Edrington, Memphis, Tennessee		2905
Heber Wilkinson Windley, Jr., Washington, N. C.		2906
Finley Royace Reed, Asheville, N. C.		2907
Kenneth Dale Owen, Charlotte, N. C.		2908
Larry Winford Carroll, Chapel Hill, N. C.		2909
William Glenn Davis, Jr., Norfolk, Va.		2910
Elwood Martin Parkerson, Burlington, N. C.		2911
Thomas Carlton Webster, Yanceyville, N. C.		2912
Robert Boone Outland, Jr., Rich Square, N. C.		2913
Numa Watt Cobb, Jr., Gibsonville, N. C.		2914
Wilbur Bryan Bland, Chapel Hill, N. C.		2915
Guy Edwin Haddix, Battle Creek, Mich.		2916
Thomas Aldon Baucom, Pensacola, Florida		2917
Thomas Washington Vinson, Jr., Durham, N. C.		2918
Cotesworth Pinckney Fishburne, Jr., Walterboro, S. C.		2919

<i>Name</i>	<i>Address</i>	<i>License No.</i>
George Willard Walker, Virgilina, Virginia.....		2920
John William Barts, Jr., Yanceyville, N. C.....		2921
James Franklin Peppers, Marion, N. C.....		2922
William Sidney Prevost, Jr., Cape May, N. J.....		2923
Milton Vines Massey, Oceanside, Calif.....		2924
Eldon Hudson Parks, Chapel Hill, N. C.....		2925
Earl Dale Hornbeck, Tryon, N. C.....		2926
Charles Prince Youmans, Durham, N. C.....		2927
Carl Benjamin Massey, Waxhaw, N. C.....		2928
Cynthia Spicola Harper, Chapel Hill, N. C.....		2929
Laddie Lynn Jones, Biloxi, Mississippi.....		2930
Dean Rigney Peake, Bakersville, N. C.....		2931
Jerry Mallie Parsons, Bakersville, N. C.....		2933
Burton Allan Horwitz, Raleigh, N. C.....		2934
Jay Mack Collie, Durham, N. C.....		2935
Billy Dennis, Asheville, N. C.....		2936
Frank Webb McCracken III, Chapel Hill, N. C.....		2937
Charles Henry Pearson, Charlotte, N. C.....		2938
James Newton Ziglar, Jr., Winston-Salem, N. C.....		2939
Jasper Holt Chesson, Swansboro, N. C.....		2940
Howard Warren Conley, Fletcher, N. C.....		2941
Daniel Milton Lotz, Northport, N. Y.....		2942
Frank Mayo Ramos, Butner, N. C.....		2943
Garland Richard Homes, Washington, N. C.....		2944
William Robert Caviness, Durham, N. C.....		2945
Gary Heeseman, Jr., Chapel Hill, N. C.....		2946
Albert Gaskins Byrum, Jr., Edenton, N. C.....		2947
David Richard Graham, Atlanta, Ga.....		2948
Charles Alfred Huneycutt, Chapel Hill, N. C.....		2949
William Jackson Lee, Chapel Hill, N. C.....		2950
John Kerr Campbell, Chapel Hill, N. C.....		2951
Robert Brown Taylor, Jacksonville, N. C.....		2952
Joseph Francis Quigg, Fayetteville, N. C.....		2953
George Nelson Horne, Kannapolis, N. C.....		2954
William Gordon Quarles, Chapel Hill, N. C.....		2955

The following applicants for Dental Hygiene license, having made an average of 80 per cent or more, were issued license to practice dental hygiene in North Carolina:

<i>Name</i>	<i>Address</i>	<i>License No.</i>
Judy Carol Ellis, Mt. Olive, N. C.....		191
Joan Marquerite Fox, Chapel Hill, N. C.....		192
Sylvia Kay Verdery, Raleigh, N. C.....		193
Joan Schwitz Schneider, Durham, N. C.....		194
Lana Louise Hines, Winston-Salem, N. C.....		195
Linda Lou Carter, Greensboro, N. C.....		196
Joan Louise Fleming, Charlotte, N. C.....		197
Judith Ann Walsh, Tarawa Terrace, N. C.....		198
Joy Manship Duncan, Wilkesboro, N. C.....		199
Marcia Hough Cloninger, Dallas, N. C.....		200
Penalie Carol Cole, Charlotte, N. C.....		201
Melinda Westmoreland, Charlotte, N. C.....		202
Sandra Kay Saine, Lincolnton, N. C.....		203
Nancy Elizabeth Sutherland, Durham, N. C.....		204
Marilyn Joyce Wright, Chapel Hill, N. C.....		205
Lyna Jewell Rogers, Gastonia, N. C.....		206
Linda Gray Dickens, Roanoke Rapids, N. C.....		207
Joan Caroline White, Durham, N. C.....		208
Susan Ruffin Prevost, Hazelwood, N. C.....		209
Elizabeth Cadle McGurn, Jacksonville, N. C.....		210

The following applicants for dental license, having made an average grade of less than 80 per cent were declared to have failed the examination:

<i>Name</i>	<i>Address</i>
William Benton Bendix,	Freeport, N. Y.
Donald Lee Chalmers,	Houston, Texas
John Nippert Crombie,	Fort Bragg, N. C.
Samuel Chapman Elliott,	Baltimore, Maryland
William Newman Friedman,	Richmond, Va.
Robert Russell Herbin, Jr.,	Greensboro, N. C.
Harold Martin Holt,	Wilson, N. C.
Salathiel Francis Horton, Jr.,	Loris, S. C.
Lloyd Eugene Koepke,	Asheville, N. C.
Emund Levendusky,	Lehighton, Pa.
Wallace Wade Luther,	Fort Bragg, N. C.
Harvey Allen McCandless, Jr.,	Butler, Pa.
Gene Paul Messenburg,	Goldsboro, N. C.
Daylene Page,	Tuskegee, Ala.
James Constantine Pappass,	Winchester, Va.
Demosthenes Theofanis Rantis,	Boone, N. C.
Leon Otto Sheffield,	Fayetteville, N. C.

There being no further business, the meeting was adjourned.

I am enclosing a financial statement of the North Carolina State Board of Dental Examiners as of January 1, 1963 to December 31, 1963, which was compiled by Certified Public Accountants.

Respectfully submitted,

J. H. GUION, D.D.S., *Secretary-Treasurer*

North Carolina State Board of Dental Examiners

CONDENSED CASH RECEIPTS AND DISBURSEMENTS

Year Ending December 31, 1963

Cash on Hand January 1, 1963.....\$12,987.81

Cash Receipts for Year

Dental Licenses Issued.....	\$11,096.00
Hygienist Licenses Issued.....	304.00
Dental Examination Fees.....	2,520.00
Hygienist Examination	400.00
Miscellaneous Income	220.00

Total Cash Receipts..... 14,540.00

Total Cash to be Accounted for.....\$27,527.81

Cash Disbursements During Year:

Salaries:

Secretary and Treasurer Dr. J. H. Guion.....	\$ 1,500.00
Assistant Secretary Ellen Garrison.....	1,235.60
Per Diem Travel Expenses of St. Bd.....	2,585.14
Dues—Amer. Assoc. of Dental Examiners.....	75.00
Bd. Meeting & Examination Expenses.....	977.03
Postage	290.35
Stationery, Printing & Office Supplies.....	610.10
Telephone	76.39
Auditing	150.00
Refund—Overpayment 1962 Dental License.....	2.00
American Dental Association Directory.....	12.50
State Intangible Tax on Bk. Account	
(Refunded 1964)	12.61
Dentistry School of Research & Ed.....	410.00
Attorney's Fees and Expenses.....	4,089.62
Board Members Expenses to American	
Association of Dental Examiners Mtgs.....	480.77

Total Cash Disbursements..... 12,507.11

CASH ON HAND AND IN BANK

DECEMBER 31, 1963.....\$15,020.70

Action by House of Delegates: Received for information May 12, 1964.

House of Delegates 1964

ATTENDANCE RECORD

	MEETINGS		
	First May 10	Second May 12	Third May 13
SPEAKER OF THE HOUSE			
Ralph D. Coffey.....	•	•	•
OFFICERS			
S. Byron Towler, President.....	•	•	•
Darden J. Eure, President-Elect.....	•	•	•
Barry G. Miller, Vice President.....	•	•	
Dennis S. Cook, Secretary-Treasurer.....	•	•	•
EXECUTIVE COMMITTEE			
Thomas G. Collins, Chairman.....	•	•	•
Pearce Roberts, Jr.....	•	•	•
C. W. Poindexter.....	•	•	•
Edgar D. Baker.....	•	•	•
ETHICS COMMITTEE			
Thomas M. Hunter, Chairman.....	•	•	•
A. C. Current, Jr.....	•	•	
Norman F. Ross.....	•	•	•
W. Stewart Peery.....	•	•	
Horace K. Thompson.....	•	•	•
FIRST DISTRICT			
M. M. Forbes.....	•	•	•
John W. Girard, Jr.....	•	•	•
Carey T. Wells, Jr.....	•	•	
M. W. Carpenter.....	•	•	•
C. B. Taylor.....		•	•
C. Z. Candler, Jr.....			•
SECOND DISTRICT			
J. B. Freedland.....	•	•	•
Robert A. George.....	•	•	•
Horace P. Reeves, Jr.....			
James A. Bingham, Jr.....	•	•	•
Paul A. Stroup, Jr.....	•	•	
James A. Harrell.....	•		•
Burke W. Fox.....			•

MEETINGS

May 10 First	May 12 Second	May 13 Third
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THIRD DISTRICT

Maurice B. Richardson.....	•	•	•
Baxter B. Sapp, Jr.....	•	•	•
T. Edgar Sikes, Jr.....	•	•	•
John S. Dilday.....	•	•	
C. W. Horton.....	•	•	•

FOURTH DISTRICT

Nash H. Underwood.....	•	•	•
L. D. Herring.....	•		
William H. Oliver.....		•	•
J. Henry Ligon, Jr.....	•	•	•
Joseph M. Johnson.....	•	•	•
John N. Denning.....		•	•
E. A. Pearson, Jr.....	•		

FIFTH DISTRICT

M. W. Aldridge.....	•	•	•
C. T. Barker.....	•	•	•
R. H. Gilbert.....	•	•	
G. Curtis Wilson.....	•	•	•
W. L. Hand, Jr.....			•
L. R. Turner.....			•
Z. L. Edwards.....	•	•	

TOTAL PRESENT	37	37	34
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Scientific Sessions

ESSAYS
TABLE CLINICS
PROJECTED CLINICS

ESSAYS

1. **Clinical Pharmacology, Preanesthetic Evaluation, Complications and Safeguards of Local Anesthetics**, Raymond E. Boudreaux, D.D.S., New Orleans, Louisiana.
2. **Surgical Technics: Preparation of the Mouth for Dentures**, Raymond E. Boudreaux, D.D.S., New Orleans, Louisiana.
3. **Mouth Preparations for Removable Partial Dentures**, Colonel Frank C. Jerbi, D.C., Walter Reed Army Medical Center, Washington, D. C.
4. **Immediate Dentures**, Colonel Frank C. Jerbi, D.C., Walter Reed Army Medical Center, Washington, D. C.
5. **Final Adjustment and Cementation**, R. A. McEwen, D.D.S., Atlanta, Georgia.
6. **Tooth Preparation and Impression Procedures for Fixed Prosthesis**, R. A. McEwen, D.D.S., Atlanta, Georgia.

TABLE CLINICS

1. **Periodontia-Split Flap and Gingival Extension Procedures**, M. W. Aldridge, D.D.S., Greenville.
2. **A Root Canal Treatment Procedure**, Reynolds A. Carnevale, D.D.S. and Thomas C. Boykin, D.D.S., Goldsboro.
3. **Porcelain Baked to Gold for Crown and Bridge**, DeLeon Wells, Jr., D.D.S., Wallace.
4. **Oral Mouth Guards**, Albert P. Cline, Jr., D.D.S., Canton.
5. **Space Maintenance and Pedodontia in General Practice**, Robert P. Hagaman, D.D.S., Lenoir, and John H. Shell, D.D.S., Valdese.
6. **Oral Manifestation of Systemic Diseases**, Stanford Harris, D.D.S., Weaverville.
7. **Chair-side Replacement of Partial Denture Teeth**, David E. Henson, D.D.S., Franklin.
8. **New Method for Fabricated Temporary Bridges**, Eugene W. Lawrence, Jr., D.D.S., Franklin.
9. **What They See**, Miss Shirley Jordan and Miss Susan Prevost, North Carolina Dental Hygienists Association.
0. **Endodontics**, Roy L. Earp, D.D.S., Raleigh.
1. **Oral Pap Smears for Cancer Detection**, F. Durant Bell, D.D.S., and Arthur E. Davis, Jr., M.D., Raleigh.

352 SCIENTIFIC SESSIONS

12. **Photography in Case Presentation**, Gordon L. Townsend, D.D.S., Dunn.
13. **Treatment of Exposures in Primary Teeth**, Thomas H. Fetzner, D.D.S., Raleigh.
14. **Good Records Help Build a Good Practice**, Richard S. Hunter, D.D.S., Raleigh.
15. **Practice Management**, Colin P. Osborne, Jr., D.D.S., Lumberton.
16. **Photography in the Dental Office**, James A. Crawford, D.D.S., Raleigh.
17. **Vital and Non-Vital Pulpotomy**, Theodore R. Oldenburg, D.D.S., and Benjamin R. Baker, D.D.S., UNC School of Dentistry.
18. **Partial Dentures for the Cleft Palate**, Matthew T. Wood, D.D.S., UNC School of Dentistry.
19. **Pre-Extraction Records for the Immediate Denture Patient**, John B. Sowter, D.D.S., UNC School of Dentistry.
20. **Practical Laboratory Hints**, Ludwig G. Scott, D.D.S., Burlington.
21. **Oral Examination and Charting, with Special Emphasis on the Periodontium**, James B. Howell, D.D.S., Greensboro.
22. **Improved Techniques When Using the Verticulator**, Clyde L. Taylor, D.D.S., Greensboro.
23. **Pin Restorations for Fractured Anteriors**, Marion L. Ralls, Jr., D.D.S., Greensboro.
24. **Recovery of Lost Teeth**, William M. Ditto, D.D.S., Greensboro.
25. **Full Denture Prosthetics for Child Patients**, James B. King, Jr., D.D.S., Chapel Hill.
26. **Dental Public Relations**, Charles W. Horton, D.D.S., and L. P. Megginson, Jr., D.D.S., High Point Dental Society.

PROJECTED CLINICS

1. **Responsibility — Ours and the Patient's**, Mett B. Ausley, D.D.S., Southeastern Periodontic Study Club.
2. **Immediate Root Canal Treatment**, Walter S. Linville, Jr., D.D.S., Loblolly Study Club.
3. **Minor Tooth Movement**, Jack E. Silvers, D.D.S., Coastal Study Club.
4. **Water**, George L. Edwards, Jr., D.D.S., Demeritt Pedodontic Study Club.
5. **Precision Partials**, Joe B. Roberson, D.D.S., Western North Carolina Study Club.

General Sessions

SUNDAY, MAY 10, 1964

MONDAY, MAY 11, 1964

WEDNESDAY, MAY 13, 1964

FIRST GENERAL SESSION

Sunday, May 10, 1964

Call to Order: The first general session of the 108th Annual Session of the North Carolina Dental Society was called to order by President S. Byron Towler at 8:30 p.m., Sunday, May 10, 1964, in the Ballroom of The Carolina, Pinehurst, North Carolina. Dr. Robert A. George pronounced the invocation.

Memorial Service: A memorial service was conducted by Dr. Robert A. George, Chairman, Necrology Committee, in memory of the following members who had died since the 1963 Annual Session: Everett Newton Biggerstaff, Paisley Fields, William Frederick Jones, Charles Somers McCall, Arthur Harris Johnson, Graham McLean, Walter Leon McRae, Walter Ernest Neal, and Lee Roy Zimmerman.

Choral music for the service was presented by the University of North Carolina School of Dentistry Glee Club under the direction of Dr. Roger E. Sturdevant with Mrs. Sturdevant at the piano.

Introduction of Guests: Out-of-state visitors and distinguished guests were introduced by Dr. Richard F. Hunt, Jr., Chairman, Hospitality Committee. They included: Dr. James P. Hollers, San Antonio, Texas, President, American Dental Association and Mrs. Hollers; Dr. William A. Garrett, Atlanta, Trustee, Fifth District, American Dental Association; Chancellor William B. Aycock and Mrs. Aycock, University of North Carolina at Chapel Hill; Dr. Raymond E. Boudreaux, New Orleans; and Dr. and Mrs. R. A. McEwen, Atlanta.

Dr. Hunt then recognized the following members of the Class of 1930 of the Medical College of Virginia, which was President Towler's class: Dr. J. P. Broadus, Franklin, Virginia; Dr. and Mrs. Bernard A. Brann, Leesburg, Virginia; Dr. and Mrs. C. P. Hurt, Lynchburg, Virginia; Dr. R. O. Reynolds, Chatham, Virginia; Dr. and Mrs. J. P. Cross, Suffolk, Virginia; and Dr. and Mrs. P. C. Spitzer, Harrisonburg, Virginia.

Others recognized by Dr. Hunt were: Dr. Guy Harrison, Richmond, Virginia; Dr. Eugene B. Wyman, Cambridge, Massachusetts; Dr. Howard B. Higgins, Spartanburg, South Carolina, immediate past president, South Carolina Dental Association and Mrs. Higgins; Dr. William C. Draffin, Columbia, South Carolina, past president South Carolina Dental Association; Dr. and Mrs. E. G. Bumgardner, Columbia, South Carolina;

Mr. Talmadge Poole, Durham, Director, North Carolina Division, American Cancer Society.

President Towler presented the officers of the North Carolina Dental Society and recognized the following representatives of allied organizations: Miss Rebecca Ritchie, Statesville, President, North Carolina Dental Assistants Association; Mrs. Alberta Reed, Massillon, Ohio, President, American Dental Assistants Association; Miss Margaret Swanson, Chicago, Executive Secretary, Miss Etta Mae Wirt, Miami, Trustee, District VI, and Miss Alberta Beat, Chapel Hill, First Vice President, American Dental Hygienists Association; and Mrs. D. Clyde Young, Jr., Salisbury, President, North Carolina Dental Auxiliary.

Presentation of Check to Relief Fund: Mrs. Roy A. Miller, Jr., Chairman, Amalgam Scrap Collection Committee, North Carolina Dental Auxiliary, presented a check for \$2,233.41, payable to the North Carolina Dental Society Relief Fund, to Dr. J. T. Lasley, Chairman, Relief Committee. It represented the proceeds from the Auxiliary's 1963-64 Scrap Amalgam Drive.

Dr. Lasley thanked the Auxiliary for its continued efforts in behalf of the Relief Fund and noted that during the past eleven years the Auxiliary had raised over \$20,000 for this cause. He also thanked the dental supply houses which had assisted the Auxiliary in its Scrap Amalgam Drive.

President's Address: Vice President Barry G. Miller assumed the chair while President Towler presented his report for the year.

Vice President Miller announced the appointment of the following to the Committee on the President's Address: Drs. S. L. Bobbitt, Chairman; C. C. Diercks, and Darden J. Eure.

Address by A.D.A. President: Dr. Clyde E. Minges introduced Dr. James P. Hollers, President, American Dental Association. Dr. Hollers emphasized the opposition of the A.D.A. to the King-Anderson Bill now before Congress; complimented the progress of organized dentistry in North Carolina; described the progress on the new A.D.A. Headquarters Building in Chicago; and discussed the expanded A.D.A. programs and services made possible by the recent increase in dues.

Report of Dental Foundation: Dr. Ralph D. Coffey, President, Dental Foundation of North Carolina, Incorporated, introduced Dr. John C. Brauer, Dean, School of Dentistry, University of North Carolina and Secretary of the Foundation.

Dr. Brauer gave a progress report on the new dental research building and announced the appointment of Dr. James W. Bawden as director of the research center.

Award to Dr. Brauer: President Towler presented a distinguished service award to Dean Brauer for fourteen years of faithful and productive service as Dean of the University of North Carolina School of Dentistry.

Address by Chancellor Aycock: Dr. Paul E. Jones introduced Chancellor William B. Aycock, University of North Carolina at Chapel Hill. Chancellor Aycock cited Dean Brauer for his accomplishments as dean of the dental school and termed him an "educational statesman."

Announcements: Executive Secretary Andrew M. Cunningham announced that registration for the 108th Annual Session at the end of the first day totalled 615, including 270 members. He read a telegram from I. Beverly Lake, Democratic candidate for Governor of North Carolina, expressing best wishes for a successful meeting.

Adjournment: The First General Meeting was adjourned at 10:30 p.m.

SECOND GENERAL SESSION

Monday, May 11, 1964

Call to Order: The Second General Session of the 108th Annual Session of the North Carolina Dental Society was called to order by President S. Byron Towler at 8:45 p.m., Monday, May 11, 1964, in the Ballroom of The Carolina, Pinehurst, North Carolina. Dr. H. Royster Chamblee pronounced the invocation.

Election of Officers: President Towler appointed the following to serve as tellers: Drs. Worth M. Byrd, David H. Freshwater, and J. Malcolm McAllister.

Officers for 1964-1965 elected by acclamation were:

President-Elect—Dr. Pearce Roberts, Jr., Asheville

Vice President—Dr. James A. Harrell, Elkin

Secretary-Treasurer—Dr. Dennis S. Cook, Lenoir

Delegates to the American Dental Association for 3-year terms elected by acclamation were:

Dr. Erbie M. Medlin (1967), Aberdeen

Dr. Frank O. Alford (1967), Charlotte

Selection of site for 1966: On motion, duly seconded and carried, it was voted to accept the invitation of The Carolina to hold the 1966 Annual Session in Pinehurst May 4-8.

Announcements: Executive Secretary Andrew M. Cunningham announced that registration for the 108th Annual Session at the end of the second day totalled 1,410, including 642 members.

Mr. Cunningham read a telegram from Democratic gubernatorial candidate Dan K. Moore expressing his regret that he could not attend the meeting.

Dr. Lindahl requested dentists who would treat cerebral palsy patients to notify the School of Dentistry at Chapel Hill.

Adjournment: The Second General Session was adjourned at 10:00 p.m.

THIRD GENERAL SESSION

Wednesday, May 13, 1964

Call to Order: The Third General Session of the 108th Annual Session of the North Carolina Dental Society was called to order by President S. Byron Towler at 12:00 o'clock noon, Wednesday, May 13, 1964 in the Ballroom of The Carolina, Pinehurst, North Carolina. Dr. Walter T. McFall pronounced the invocation.

Installation of Officers: President Towler installed Dr. Darden J. Eure as president 1964-1965.

Dr. Eure installed the following newly elected officers and delegates:

President-Elect—Dr. Pearce Roberts, Jr., Asheville

Vice President—Dr. James A. Harrell, Elkin

Secretary-Treasurer—Dr. Dennis S. Cook, Lenoir

Delegates to American Dental Association (1967):

Dr. Erbie M. Medlin, Aberdeen

Dr. Frank O. Alford, Charlotte

Presidential Appointments: President Eure announced the following appointments:

Chairman, Executive Committee—Dr. Thomas G. Collins, Raleigh

Member, Executive Committee (1967)—Dr. William L. Hand, Jr., New Bern

Speaker of the House—Dr. Ralph D. Coffey, Morganton

General Chairman 1965 Annual Session—Dr. Freeman C. Slaughter, Kannapolis

Announcements: Executive Secretary Andrew M. Cunningham announced that registration for the 108th Annual Session had totalled 1,774, including 758 members. He noted that this set a new record for total attendance at an annual meeting.

Mr. Cunningham read a telegram from Winston-Salem extending an invitation to select Winston-Salem as convention site for 1966, the 200th Anniversary of that community.

Mr. Cunningham read a telegram from Democratic gubernatorial candidate Richardson Preyer expressing his best wishes for a successful meeting.

Report of Clinic Committee: Dr. James A. Harrell, Chairman, Clinic Committee, announced that the following table clinics would be recommended for presentation at the 105th Annual Session of the American Dental Association, November 8-12, 1964, San Francisco: A Root Canal Treatment Procedure, Drs. Reynolds A. Carnevale and Thomas C. Boykin, Goldsboro; Porcelain Baked to Gold for Crown and Bridge, Dr. DeLeon Wells, Jr., Wallace; Photography in Case Presentation, Dr. Gordon L. Townsend, Dunn; Photography in the Dental Office, Dr. James A. Crawford, Raleigh; Vital and Non-Vital Pulpotomy, Drs. Theodore R. Oldenburg and Benjamin R. Baker, UNC School of Dentistry; Recovery of Lost Teeth, Dr. William M. Ditto, Greensboro; Dental Public Relations, Drs. Charles W. Horton and L. P. Megginson, Jr., High Point Dental Society.

Adjournment: The 105th Annual Session of the North Carolina Dental Society was adjourned sine die at 12:15 p.m.

Registration

108TH ANNUAL SESSION
PINEHURST, NORTH CAROLINA
MAY 10-13, 1964

NCDS Members

First District	109	(43 %)	
Second District	205	(65 %)	
Third District	189	(67 %)	
Fourth District	154	(76 %)	
Fifth District	101	(60 %)	758 (62 %)
Visiting Dentists			124
Dental Students			120
Dental Assistants			100
Dental Hygienists			38
Dental Auxiliary			226
Exhibitors			166
Laboratory Technicians			31
Guests			211
TOTAL REGISTRATION			1,774



NORTH CAROLINA DENTAL SOCIETY OFFICERS 1964-1965: Left to right—Pearce Roberts, Jr., Asheville, President-Elect; Darden J. Eure, Morehead City, President; James A. Harrell, Elkin, Vice President; Dennis S. Cook, Lenoir, Secretary-Treasurer.

Directory 1964-1965

NORTH CAROLINA DENTAL SOCIETY
OFFICERS AND COMMITTEES
LIST OF PAST PRESIDENTS
N. C. DENTAL ASSISTANTS'
ASSOCIATION OFFICERS
N. C. DENTAL AUXILIARY OFFICERS
N. C. DENTAL HYGIENISTS'
ASSOCIATION OFFICERS
N. C. DENTAL LABORATORY
ASSOCIATION OFFICERS

NORTH CAROLINA DENTAL SOCIETY 1964-1965

OFFICERS

President: Darden J. Eure, 707 Bridges Street.....Morehead City
President-Elect: Pearce Roberts, Jr., 410 Doctors Building.....Asheville
Vice President: James A. Harrell, Box 688.....Elkin
Secretary-Treasurer: Dennis S. Cook, 210 Norwood Street.....Lenoir
Editor-Publisher: Barry G. Miller, 1529 Elizabeth Avenue.....Charlotte
Associate Editor-Publisher: M. Lamar Dorton,
131 North Mulberry Street.....Statesville
Photographic Editor: J. Ernest Roberts, Medical Village.....Burlington
Speaker of the House: Ralph D. Coffey, Box 693.....Morganton
Executive Secretary: Andrew M. Cunningham, Box 11065.....Raleigh

EXECUTIVE COMMITTEE

Chairman: Thomas G. Collins (1965), 403 Ligon Building,
800 St. Mary's Street.....Raleigh
C. W. Poindexter (1966), 408 Elmwood Drive.....Greensboro
W. L. Hand, Jr. (1967), Box 335.....New Bern
S. Byron Towler (1965), 801 Professional Building.....Raleigh

DELEGATES TO THE AMERICAN DENTAL ASSOCIATION

Ralph D. Coffey (1965), *Chairman*
Frank O. Alford (1967) Paul E. Jones (1966)
Z. L. Edwards (1966) Erbie M. Medlin (1967)
C. C. Poindexter (1965)

ALTERNATE DELEGATES TO THE AMERICAN DENTAL ASSOCIATION

Thomas G. Collins
Dennis S. Cook
Darden J. Eure

James A. Harrell
Barry G. Miller
Pearce Roberts, Jr.

STANDING COMMITTEES

Clinic: A. P. Cline, Jr., Chairman; Frank R. Graham, W. W. Ellis, C. P. Osborne, Jr., J. L. Cox.

Constitution and Bylaws: Z. L. Edwards (1966) Chairman; G. Shuford Abernethy (1968); D. T. Carr (1969); T. G. Nisbet (1965); Walter H. Finch, Jr. (1967).

Council on Dental Health: W. L. Hand, Jr. (1966), Chairman; J. Homer Guion (1969); E. A. Pearson, Jr. (1968); William D. Yelton (1965); Frank G. Atwater (1967).

Dental Education: C. W. Sanders (1969), Chairman; R. B. Barden (1966); Riley E. Spoon, Jr. (1965); E. D. Baker (1965); F. A. Buchanan (1966); Z. L. Edwards, Jr. (1967), Special Advisor to N. C. Dental Assistants Association; Roy L. Lindahl (1967); George S. Alexander (1968), Special Advisor to N. C. Dental Hygienists Association; S. P. Gay (1968); Ralph D. Coffey (1969).

Ethics: Thomas M. Hunter (1967), Chairman; W. Stewart Peery (1965); Norman F. Ross (1968); Horace K. Thompson (1966); C. Z. Candler, Jr. (1969).

Exhibit: E. A. Pearson, Jr., Chairman; John W. Girard, Jr., R. D. Carlough, C. Robert VanderVoort, James H. Lee.

Insurance: John S. Dilday (1966), Chairman; T. L. Blair (1969); C. Don Gerdes (1965); Charles T. Barker (1967); J. S. D. Nelson (1968).

Legislative: H. Royster Chamblee (1965), Chairman; L. C. Holshouser (1968), Secretary; Paul E. Jones (1966); Dennis S. Cook (1967); Mott P. Blair (1969).

Library and History: Neal Sheffield (1968), Chairman; Frank O. Alford (1969); S. H. Steelman (1965); M. M. Lilley (1966); H. Royster Chamblee (1967).

Membership: Pearce Roberts, Jr., Chairman; John W. Girard, Jr., H. P. Reeves, Jr., Charles W. Horton, William H. Oliver, James H. Lee.

Military and Veterans' Affairs: J. Harry Spillman (1967), Chairman; Coyte R. Minges (1969); Guy R. Willis (1965); H. E. Plaster (1966); T. Edwin Perry (1968).

Necrology: C. B. Johnson, New Bern (1969), Chairman; Robert A. George (1968); Marcus R. Smith (1965); W. T. Pennell (1967); J. Ernest Roberts (1966).

Program: Freeman C. Slaughter, Chairman; S. H. Isenhower, Norman F. Ross, Glenn F. Bitler, W. L. Hand, Jr.

Prosthetic Dental Service: C. P. Osborne, Jr. (1968), Chairman; C. Z. Candler, Jr. (1969); C. D. Eatman (1965); Thomas L. Dixon (1966); James A. Harrell (1967).

Publicity: Charles T. Barker (1968), Chairman; Walter H. Davis (1965); W. Stewart Peery (1966); J. Henry Ligon, Jr. (1967); H. Estes Butler (1969).

Relief: J. T. Lasley (1968), Chairman; J. W. Heinz (1969); S. L. Bobbitt (1965); W. E. Clark (1966); J. M. Kilpatrick (1967).

State Institutions: K. L. Johnson (1968), Chairman; M. L. Cherry (1965); S. H. Isenhower (1966); Donald L. Henson (1967); Thomas A. Smith (1969).

SPECIAL COMMITTEES

Annual Session: Freeman C. Slaughter (Program), General Chairman; L. D. Herring (Arrangements); A. P. Cline, Jr. (Clinic); Robert H. Gilbert (Entertainment); E. A. Pearson, Jr. (Exhibit); Richard F. Hunt, Jr. (Hospitality); David H. Freshwater (Monitor); C. B. Johnson, New Bern (Necrology); Charles T. Barker (Publicity); Robert H. Gainey (Sports); John T. Hughes (Visual Education).

Arrangements: L. D. Herring, Chairman; M. W. Aldridge, William A. Mynatt, M. L. Cherry, William G. Ware, Jr.

Blue Shield-Blue Cross: F. D. Bell (1967), Chairman; Grover W. Smith (1966); Vaiden B. Kendrick (1965).

Cancer: Robert H. Sager, Chairman; Fred L. Self, C. Dean Couch, Jr., Henry O. Lineberger, Jr., W. S. Ketcham.

Children's Dental Health: Glenn F. Bitler, Chairman; John M. Archer, III; Cecil A. Pless, Jr., Junius H. Rose, Jr., Marion L. Ralls, Jr.

Corporate Practice: J. H. Spillman, Chairman; H. C. Harrelson, Jr., C. W. Poindexter, J. Henry Ligon, Jr., T. Edgar Sikes, Jr., E. C. Kirkendol.

Dental Care For the Aged: Henry O. Lineberger, Jr., Chairman; C. Z. Candler, Jr., W. W. Demeritt, Riley E. Spoon, Jr., Coyte R. Minges, John T. Hughes, Glenn L. Hooper.

Dental Hygienists: J. H. Spillman, Chairman; M. W. Carpenter, James H. Lee, C. W. Poindexter, Lloyd B. Stanley.

Dental Service Corporation: Roy L. Lindahl, Chairman; S. H. Isenhower, Paul Fitzgerald, Jr., Wesley E. Kelley, J. S. D. Nelson, Pearce Roberts, Jr., Dan Wright, James M. Zealy.

Entertainment: Robert H. Gilbert, Chairman; Cecil A. Pless, Jr., J. O. Thorpe, James A. Leggette, Lloyd B. Stanley.

Hospitality: Richard F. Hunt, Jr., Chairman; M. M. Forbes, J. Donald Kiser, John C. Brauer, S. Byron Towler, Walter S. Linville, Jr.

Industrial Commission: S. Byron Towler, Chairman; S. L. Bobbitt, E. D. Baker.

Monitor: David H. Freshwater, Chairman; R. Hogan Gaskins, Jr., W. W. Blackman, K. Carrol Kennedy, Galen C. Moser, L. T. Sherrill, Jr.

School Health Co-ordinating Service: Thomas B. Reid, Jr., Chairman; George S. Alexander, C. Z. Candler, Jr., T. Edgar Sikes, Jr., Thomas G. Collins.

Sports: Robert H. Gainey, Chairman; R. E. Brooks, Frederick G. Hasty, Edward N. Pridgen, William J. Wiggs.

State Employees: M. W. Aldridge, Chairman; C. W. Horton, William H. Oliver, Paul A. Stroup, Jr., C. B. Taylor.

Study Club: R. Hogan Gaskins, Jr., Chairman; F. A. Buchanan, M. Lamar Dorton, David D. King, Jr., Marion L. Ralls, Jr.

Visual Education: John T. Hughes, Chairman; Sanford W. Thompson, III, C. L. Sockwell.

PRESIDENTS OF THE NORTH CAROLINA DENTAL SOCIETY SINCE ITS ORGANIZATION

1856.....	*W. F. Bason	1818-19.....	*J. N. Johnson
1857.....	*E. H. Andrews	1919-20.....	W. T. Martin
1858.....	*B. F. Arrington	1920-21.....	*J. H. Judd
1866.....	*B. F. Arrington	1921-22.....	*W. M. Robey
1875-76.....	*B. F. Arrington	1922-23.....	*S. R. Horton
1876-77.....	*V. E. Turner	1923-24.....	*R. M. Morrow
1877-78.....	*J. W. Hunter	1924-25.....	*J. A. McClung
1878-79.....	*E. L. Hunter	1925-26.....	*H. O. Lineberger
1879-80.....	*D. E. Everitt	1926-27.....	B. F. Hall
1880-81.....	*Isaiah Simpson	1927-28.....	*E. B. Howle
1881-82.....	*M. A. Bland	1928-29.....	I. R. Self
1882-83.....	*J. R. Griffith	1929-30.....	*J. H. Wheeler
1883-84.....	*W. H. Hoffman	1930-31.....	Paul E. Jones
1884-85.....	*J. H. Durham	1931-32.....	*Dennis Keel
1885-86.....	*J. E. Matthews	1932-33.....	Wilbert Jackson
1886-87.....	*B. H. Douglas	1933-34.....	*Ernest A. Branch
1887-88.....	*T. M. Hunter	1934-35.....	*L. M. Edwards
1888-89.....	*V. E. Turner	1935-36.....	Z. L. Edwards
1889-90.....	*S. P. Hilliard	1936-37.....	*D. L. Pridgen
1890-91.....	*H. C. Herring	1937-38.....	J. F. Reece
1891-92.....	*C. L. Alexander	1938-39.....	G. Fred Hale
1892-93.....	*F. S. Harris	1939-40.....	F. O. Alford
1893-94.....	*C. A. Rominger	1940-41.....	*C. M. Parks
1894-95.....	*H. D. Harper	1941-42.....	C. C. Poindexter
1895-96.....	*R. H. Jones	1942-43.....	*Paul Fitzgerald
1896-97.....	*J. E. Wyche	1943-44.....	Clyde E. Minges
1897-98.....	*H. V. Horton	1944-45.....	O. C. Barker
1898-99.....	*C. W. Banner	1946-47.....	E. M. Medlin
1899-1900.....	*A. C. Liverman	1947-48.....	R. M. Olive
1900-01.....	*E. J. Tucker	1948-49.....	C. W. Sanders
1901-02.....	*J. S. Spurgeon	1949-50.....	Walter T. McFall
1902-03.....	*J. H. Benton	1950-51.....	A. S. Bumgardner
1903-04.....	*J. M. Fleming	1951-52.....	*R. Fred Hunt
1904-05.....	*W. B. Ramsey	1952-53.....	*A. C. Current
1905-06.....	*J. S. Betts	1953-54.....	Neal Sheffield
1906-07.....	*J. R. Osborne	1954-55.....	*B. N. Walker
1907-08.....	*D. L. James	1955-56.....	*J. W. Branham
1908-09.....	*F. L. Hunt	1956-57.....	H. K. Thompson
1909-10.....	*J. C. Watkins	1957-58.....	R. D. Coffey
1910-11.....	*A. H. Fleming	1958-59.....	S. E. Moser
1911-12.....	*P. E. Horton	1959-60.....	*W. B. Sherrod
1912-13.....	*R. G. Sherrill	1960-61.....	L. H. Butler
1913-14.....	*C. F. Smithson	1961-62.....	N. F. Ross
1914-15.....	*J. A. Sinclair	1962-63.....	E. D. Baker
1915-16.....	*I. H. Davis	1963-64.....	S. Byron Towler
1916-17.....	*R. O. Apple	1964-65.....	Darden J. Eure
1917-18.....	*R. M. Squires		

* Deceased.

ALLIED ORGANIZATIONS

OFFICERS 1964-1965

NORTH CAROLINA DENTAL ASSISTANTS ASSOCIATION

President: Mrs. Norma West, Box 1126.....North Wilkesboro
President-Elect: Mrs. Reandy Clement, 800 St. Mary's Street.....Raleigh
Vice President: Miss Carey E. Sherrill, Route 1.....Stanley
Secretary: Mrs. Shelby Brown, 800 St. Mary's Street.....Raleigh
Assistant Secretary: Mrs. Era Pitman,
 Stratford Medical Center.....Winston-Salem
Treasurer: Mrs. Frances McPherson, 400 Alamance Road.....Burlington

NORTH CAROLINA DENTAL AUXILIARY

President: Mrs. C. W. Poindexter,, 408 Elmwood Drive.....Greensboro
President-Elect: Mrs. Robert H. Watson, 2119 Archdale Drive....Charlotte
Vice President: Mrs. Cecil A. Pless, Jr., 18 Hilltop Road.....Asheville
Recording Secretary: Mrs. Bert M. Brannon,
 5505 High Point Road.....Greensboro
Corresponding Secretary: Mrs. Marshall H. Solomon,
 1708 Madison Avenue.....Greensboro
Treasurer: Mrs. Roy L. Earp, 5905 Deblyn Avenue.....Raleigh
Historian: Mrs. H. Estes Butler, 2022 Pembroke Road.....Greensboro
Parliamentarian: Mrs. Dan T. Carr, Indian Trail.....Durham

NORTH CAROLINA DENTAL HYGIENISTS ASSOCIATION

President: Mrs. Polly White, 4 Berkley Road.....Chapel Hill
Vice President: Miss Jean Stines, W-4 Beverly Apts.....Asheville
Secretary: Mrs. Carolyn C. Williams, 1904 McCarthy Street.....Raleigh
Treasurer: Miss Judy Harward, 1407 Queen Street.....Kinston

NORTH CAROLINA DENTAL LABORATORY ASSOCIATION

President: Mr. D. J. Evans, Box 243.....Greensboro
President-Elect: Mr. J. Fred Horton, Box 900.....Wilson
Secretary-Treasurer: Mr. R. L. Jones, Box 1230.....Reidsville

